

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000000152

1. Entity Name

LLOYD PRESCOTT & CHURCHILL, INC.

FILED

May 16, 2000 8:00 am
Secretary of State

05-16-2000 90567 038 ***150.00

Principal Place of Business

Mailing Address

4902 EISENHOWER BLVD.
STE. 185
TAMPA FL 34634
US

4902 EISENHOWER BLVD.
STE. 185
TAMPA FL 33634-6317
US

2. Principal Place of Business

4803 George Road

Suite, Apt. #, etc.

SUITE 360

City & State
TAMPA, FL

Zip
33634

Country
US

3. Mailing Address

4803 George Road

Suite, Apt. #, etc.

SUITE 360

City & State
TAMPA FL

Zip
33634

Country
US



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3162011

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GORDON, MANUEL F
4902 EISENHOWER BLVD.
STE. 185
TAMPA FL 34634

Name

Gordon, Manuel F.

Street Address (P.O. Box Number is Not Acceptable)

4803 George Road

SUITE 360

City

TAMPA

FL

Zip Code

33634

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Manuel F. Gordon as Secretary

4-27-00

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
NAME D
STREET ADDRESS GORDON, MANUEL F
CITY-ST-ZIP 4902 EISENHOWER BLVD., STE. 185
TAMPA FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4803 George Road, Suite 360
CITY-ST-ZIP TAMPA, FL 33634

TITLE ☐ Delete
NAME D
STREET ADDRESS GINSBERG, SHELDON M
CITY-ST-ZIP 4902 EISENHOWER BLVD., STE. 185
TAMPA FL

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4803 George Road, Suite 360
CITY-ST-ZIP TAMPA, FL 33634

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Manuel F. Gordon as Sec/Treas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Manuel F. Gordon as Sec/Treas

4-27-00

Date

Daytime Phone #

CR2E034 (9/99)