

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000017668

1. Entity Name

1st American Estate Planning, Inc.

Principal Place of Business

2536 Countryside Blvd
Sixth Floor
Clearwater FL 33763

Mailing Address

2536 Countryside Blvd
Sixth Floor
Clearwater FL 33763

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3180688

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

Thornton, R. Maury
2536 Countryside Blvd
Sixth Floor
Clearwater FL 33763

Name Shatanoff, Robert-Harry

Street Address (P.O. Box Number is Not Acceptable)
2536 Countryside Blvd,

Sixth Floor

City Clearwater

FL

Zip Code

33763

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

Signature, typed or printed name of registered agent, if applicable

(NOTE: Registered Agent signature required when reinstating)

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, 2001 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

TITLE NAME	P/D/AS Boesch, Kenneth W III	<input type="checkbox"/> Delete
STREET ADDRESS	2536 Countryside Blvd 6th Floor	
CITY-ST-ZIP	Clearwater FL 33763	
TITLE NAME	VP Davison, Floyd	<input type="checkbox"/> Delete
STREET ADDRESS	2536 Countryside Blvd 6th Floor	
CITY-ST-ZIP	Clearwater FL 33763	
TITLE NAME	T Thornton, R. Maury	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	2536 Countryside Blvd 6th Floor	
CITY-ST-ZIP	Clearwater FL 33763	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	900004614355-1	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	-09/27/01--01087--018	
CITY-ST-ZIP	*****61.25 *****61.25	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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

KENNETH W III Boesch June 25, 2001

(727) 726-0726

FILED

01 SEP 14 PM 3:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2001 AMENDED UBR