

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000055727

1. Entity Name  
SCOTT SIMKINS, P.A.

Principal Place of Business  
5-A 9 STREET  
SAINT PETERSBURG FL 33705

Mailing Address  
2121 5TH AVE. NORTH  
ST. PETERSBURG FL 33713

2. Principal Place of Business  
25A - 9th Street South  
Suite, Apt. #, etc.

3. Mailing Address  
25A - 9th Street South  
Suite, Apt. #, etc.

City & State  
St. Petersburg, FL  
Zip  
33705  
Country  
USA

City & State  
St. Petersburg, FL  
Zip  
33705  
Country  
USA

4. FEI Number 59-3259035

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

## 6. Name and Address of Current Registered Agent

SIMKINS, SCOTT  
2121 5TH AVE. NORTH  
ST. PETERSBURG FL 33713

## 7. Name and Address of New Registered Agent

Name: Scott Simkins  
Street Address (P.O. Box Number is Not Acceptable)  
25A - 9th Street South  
City St. Petersburg FL Zip Code 33705

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 *Scott Simkins* (NOTE: Registered Agent signature required when reinstating)

DATE 8/25/01

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 \$550.00  
After September 12, 2001 Fee will be \$750.00  
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 D  
NAME SIMKINS, SCOTT  
STREET ADDRESS 25-A 9 STREET SOUTH  
CITY-ST-ZIP SAINT PETERSBURG FL 33705

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
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CITY-ST-ZIP

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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: *Scott Simkins*

DATE 8/25/01 727-822-8020

FILED  
Sep 05, 2001 8:00 am  
Secretary of State

09-05-2001 90001 012 \*\*\*550.00

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DO NOT WRITE IN THIS SPACE

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CR20034 (5/01)