

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 22, 2003 8:00 am
Secretary of State

01-22-2003 90152 032 ***150.00

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1. Entity Name

GARDNER, WILKES, SHAHEEN & CANDELORA, P.A.



Principal Place of Business

401 E JACKSON ST

2650

TAMPA FL 33602-5233

US

Mailing Address

P.O. BOX 1810

TAMPA FL 33601

US

2. Principal Place of Business

401 E. Jackson Street

3. Mailing Address

Suite, Apt. #, etc.

Suite (2400)

Suite, Apt. #, etc.

City & State
Tampa, FL

City & State

Zip
33602

Country
USA

Zip

Country

4. FEI Number

59-3263600

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

GARDNER, MERRITT A

401 E JACKSON ST

STE 2650

TAMPA FL 33602

7. Name and Address of New Registered Agent

Name

Merritt A. Gardner

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

401 E. Jackson Street

Suite (2400)

City
Tampa

FL

Zip Code
33602

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TAMARGO, TED P ☐ Delete

401 E JACKSON ST STE 2650

TAMPA FL 33602

CITY-ST-ZIP

SHAHEEN, L JOSEPH JR ☐ Delete

401 E JACKSON ST STE 2650

TAMPA FL 33602

CITY-ST-ZIP

GARDNER, MERRITT A. ☐ Delete

401 E JACKSONS ST STE 2650

TAMPA FL

CITY-ST-ZIP

WILKES, RICHARD B. ☐ Delete

401 E. JACKSON STREET, STE. 2650

TAMPA FL

CITY-ST-ZIP

BURNETT, JOSHUA E ☐ Delete

401 E JACKSON STREET SUITE 2650

TAMPA FL 33602

CITY-ST-ZIP

☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph Shaheen, Jr.

01/16/2003

(813) 221-8000

Date

Daytime Phone #

CR2E034 (10/02)