

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000061522

1. Entity Name

P.R.I.S.M. PARTNERS, INC.

FILED
Apr 04, 2001 8:00 am
Secretary of State

04-04-2001 90108 030 ***150.00

Principal Place of Business

3712 HOWELL BRANCH ROAD
WINTER PARK FL 32792
US

Mailing Address

3712 HOWELL BRANCH RD
WINTER PARK FL 32792
US

2. Principal Place of Business

37 NORTH ORANGE AVE

3. Mailing Address

2841 Buccaneer Dr.

Suite, Apt. #, etc.

Suite 500

Suite, Apt. #, etc.

City & State

ORLANDO FL

City & State

Winter Park FL

Zip

32801

Country

ORANGE

Zip

32792

Country

Seminole



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3263431

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~BLALOCK, GARY F~~
~~3712 HOWELL BRANCH ROAD~~
~~WINTER PARK FL 32792~~

7. Name and Address of New Registered Agent

Name DORIS H. Houck

Street Address (P.O. Box Number is Not Acceptable)
2841 Buccaneer Dr

City Winter Park

FL

32792

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

DORIS Houck

3/22/01

Signature, typed or printed name of registered agent and title 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 D
NAME ~~BLALOCK, GARY~~ ☒ Delete
STREET ADDRESS ~~3712 HOWELL BRANCH ROAD~~
CITY-ST-ZIP ~~WINTER PARK FL~~

TITLE D
NAME HOUCK, DORIS
STREET ADDRESS ~~3712 HOWELL BRANCH ROAD~~ 2841 Buccaneer Dr
CITY-ST-ZIP WINTER PARK FL 32792 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DORIS H. Houck

Date

3/22/01

Daytime Phone #

4076713300

CR2E034 (10/00)

0059190