

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 13, 2002 8:00 am
Secretary of State

06-13-2002 90381 002 ***550.00

DOCUMENT # P95000009629

1. Entity Name

COOKE REAL ESTATE SCHOOL HEADQUARTERS, INC.

Principal Place of Business

**4130 16TH STREET NORTH
 ST. PETERSBURG FL 33703
 US**

Mailing Address

**5355 9 STREET. NO.
 ST. PETERBURG FL 33703
 US**

2. Principal Place of Business

3. Mailing Address

4130-16 Street N.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

St. Petersburg, Florida

Zip

Country

33703

USA

4. FEI Number

59-3301497

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

COOKE, FRANK L JR.

1 BEACH DR. S.E.

SUITE 1110

ST. PETERSBURG FL 33701-3954

Name

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

City

FL

Zip Code

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 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, 2002 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 **D** ☐ Delete
 NAME **COOKE, FRANK L JR.**
 STREET ADDRESS **1 BEACH DR. S.E., #1110**
 CITY-ST-ZIP **ST. PETERSBURG FL 33701-3954**

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

TITLE **D** ☐ Delete
 NAME **COOKE, ELIZABETH C JR.**
 STREET ADDRESS **1 BEACH DR. S.E., #1110**
 CITY-ST-ZIP **ST. PETERSBURG FL 33701-3954**

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

TITLE ☐ Delete
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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 NAME
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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:

COOKE, FRANK L JR.

6/10/02

727/522-6511

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0443448 AV

CR2E034 (9/01)