

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000011186

1. Entity Name

APH FINANCIAL SERVICES, INC.

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90159 046 ***158.75

Principal Place of Business

950 N. ORLANDO AVE.
SUITE 320
WINTER PARK FL 32789

Mailing Address

P.O. BOX 1961
ORLANDO FL 32802-4961

OK

LU0061000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3297211**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 N. ORANGE AVE.
SUITE 1100
ORLANDO FL 32801

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
PALMER, CHARLES B ☐ Delete
950 N. ORLANDO AVE. SUITE 320
WINTER PARK FL 32789

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BOBINCHUCK, ROBERT M ☐ Delete
98 SAN JACINTO BLVD., SUITE 710
AUSTIN TX 78701

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
BOBINCHUCK, ROBERT M. ☒ Change ☐ Addition
701 BRAZOS STREET, SUITE 900
AUSTIN, TX 78701

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PT
PERRONE, PRESTON I ☒ Delete
950 N. ORLANDO AVE. SUITE 320
WINTER PARK FL 32789

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPS
KENT, MARK ☐ Delete
950 N. ORLANDO AVE., STE. 320
WINTER PARK FL 32789

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPS
KENT, MARK ☒ Change ☐ Addition
701 BRAZOS STREET, SUITE 900
AUSTIN, TX 78701

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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, without other like empowered.

SIGNATURE: **CHARLES B. PALMER** **DIRECTOR**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRESTON I. PERRONE, PRESIDENT

Date

Daytime Phone #

3/26/01 407-628-4544

0479688

CR2E034 (10/00)