

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000019865

1. Entity Name
95 TCI, INC.

Principal Place of Business
150 SECOND AVENUE NORTH
SUITE 800
ST. PETERSBURG FL 33701

Mailing Address
150 SECOND AVENUE NORTH
SUITE 800
ST. PETERSBURG FL 33701

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3312856

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

ULRICH, KURTIS G
150 SECOND AVE NORTH
SUITE 800
ST. PETERSBURG FL 33701

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 D ☐ Delete
NAME GRIFFIN, MARC L
STREET ADDRESS 6450 QUAIL CREEK BLVD.
CITY-ST-ZIP INDIANAPOLIS IN 46237

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

TITLE D ☐ Delete
NAME HERR, KENT R
STREET ADDRESS 2901 60TH AVENUE SOUTH
CITY-ST-ZIP ST. PETERSBURG FL 33712

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

TITLE D ☐ Delete
NAME HUBBLE, WILLIAM F
STREET ADDRESS 6246 DESCO
CITY-ST-ZIP DALLAS TX 75225

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

TITLE D ☐ Delete
NAME PRITCHARD, HOWARD M
STREET ADDRESS 163 CHUMILOTI WAY
CITY-ST-ZIP LOUDEN TN 37774

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

TITLE D ☐ Delete
NAME ULRICH, G K
STREET ADDRESS 501 31ST AVENUE NORTH
CITY-ST-ZIP ST. PETERSBURG FL 33704

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Phone #

FILED
Jan 16, 2001 8:00 am
Secretary of State

01-16-2001 90055 025 ***150.00

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DO NOT WRITE IN THIS SPACE

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