

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000027303

1. Entity Name

ICC CAPITAL MANAGEMENT, INC.

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90030 034 ***150.00

Principal Place of Business

255 S ORANGE AVE
STE. 1201
ORLANDO FL 32801-3454
US

Mailing Address

255 S ORANGE AVE
STE. 1201
ORLANDO FL 32801-3465
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3310114

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

MCMURRY, GRANT I
255 S ORANGE AVE
STE. 1201
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, 2000 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	<input type="checkbox"/> Delete
	CM			
	MCMURRY, GRANT I	255 S. ORANGE AVE., STE. 1201	ORLANDO FL 32801	
	MS			
	RUNDELL, RICHARD G	255 S. ORANGE AVE., STE. 1201	ORLANDO FL 32801	
	M			
	MCMURRY, BART	255 S. ORANGE AVE, SUITE 1201	ORLANDO FL 32801	
	M			
	TINDAL, MICHAEL H.	255 S. ORANGE AVE, SUITE 1201	ORLANDO FL 32801	
	P			
	RICHEY, J. ANDREW	255 S. ORANGE AVE, SUITE 1201	ORLANDO FL 32801	

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

4/17/00

107.839.8440

CR2E034 (9/99)