

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000027508

1. Entity Name

PERSONNEL ASSESSMENTS, INC.

FILED
Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90051 032 ***150.00

Principal Place of Business
202 ATP TOUR BLVD
STE 250
PONTE VEDRA BEACH FL 32082
US

Mailing Address
202 ATP TOUR BLVD
STE 250
PONTE VEDRA BEACH FL 32082-3260
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
202 ATP TOUR BLVD
Suite, Apt. #, etc.
Suite 300
City & State
Ponte Vedra Beach FL
Zip
32082
Country
USA

3. Mailing Address
202 ATP TOUR BLVD
Suite, Apt. #, etc.
Suite 300
City & State
Ponte Vedra Beach FL
Zip
32082
Country
USA

4. FEI Number 59-3316397
Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BALL, JOHN S
1 INDEPENDENT DRIVE
SUITE 2600
JACKSONVILLE FL 32202

7. Name and Address of New Registered Agent
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 _____ (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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	BENDER, WILLIAM C	1401 SPINNAKER BEACH DRIVE	PONTE VEDRA BEACH FL 32082	<input type="checkbox"/>
D	BENDER, OLGA	1401 SPINNAKER BEACH DRIVE	PONTE VEDRA BEACH FL 32082	<input type="checkbox"/>
P	BENDER, WILLIAM D	187 COASTAL OAK CIRCLE	PONTE VEDRA BEACH FL 32082	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
D	William C. BENDER	1401 SPINNERS BEACH DRIVE	PONTE VEDRA BEACH FL 32082	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	OLGA P. BENDER	1401 SPINNERS BEACH DRIVE	PONTE VEDRA BEACH FL 32082	<input checked="" type="checkbox"/>	<input type="checkbox"/>
P	William D. BENDER	377 N. ROSCOE BLVD	PONTE VEDRA BEACH FL 32082	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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
Date 1/12/00 904-280-0338
Daytime Phone #