

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000029128

1. Entity Name

AMPROP DEVELOPMENT CORPORATION

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90021 004 ***150.00

Principal Place of Business

Mailing Address

6875 ULMERTON RD.
LARGO FL 33771

6875 ULMERTON RD.
LARGO FL 33771-4945

2. Principal Place of Business

3. Mailing Address

406 N Reo Street

406 N Reo St

Suite, Apt. #, etc.

Suite, Apt. #, etc.

141

141

City & State
Tampa, FL

City & State
Tampa, FL

Zip
FL 33609

Country
U.S.

Zip
33609

Country
U.S.



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3313123

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

ALLEN, LEROY R
6875 ULMERTON RD.
LARGO FL 33771

Name
Leroy Allen

Street Address (P.O. Box Number is Not Acceptable)
406 N Reo Street Suite 141

City
Tampa

FL

Zip Code
33609

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
D ☐ Delete
WALSH, PATRICK J
6875 ULMERTON RD.
LARGO FL 33771

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
406 N Reo Street Suite 141
Tampa, FL 33609

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D ☐ Delete
STEFAN, TIMOTHY P
6875 ULMERTON RD.
LARGO FL 33771

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☒ Change ☐ Addition
406 N Reo Street Suite 141
Tampa, FL 33609

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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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, with all other like empowered.

SIGNATURE:

Patrick J. Walsh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-00 8136391818

Date

Daytime Phone #

CR2E034 (9/99)