

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000043949

1. Entity Name

WORLD TRADE CENTER GPTA, INC.

FILED

Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90019 019 ***150.00

Principal Place of Business

1101 CHANNELSIDE DRIVE
TAMPA FL 33602
US

Mailing Address

1101 CHANNELSIDE DRIVE
TAMPA FL 33602
US

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 59-3380387

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

BIERLEY, JOHN C
100 NORTH TAMPA ST
STE 2120
TAMPA FL 33602

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 PD
NAME PARKER, J K
STREET ADDRESS 800 SECOND AVE SOUTH, 340
CITY-ST-ZIP ST. PETERSBURG FL 33701 ☐ Delete

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 1101 channelside Drive
CITY-ST-ZIP TAMPA, FL 33602

TITLE DS
NAME CISNEROS, FRANK G
STREET ADDRESS 500 NORTH WESTSHORE BLVD. 405
CITY-ST-ZIP TAMPA FL 33609 ☐ Delete

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

TITLE PD
NAME BIERLEY, JOHN C
STREET ADDRESS 100 NORTH TAMPA STREET, 2120
CITY-ST-ZIP TAMPA FL 33602 ☐ Delete

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

TITLE DV
NAME GARY, JOHN H III
STREET ADDRESS 4228 ARBORWOOD LANE
CITY-ST-ZIP TAMPA FL 33624 ☐ Delete

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

TITLE DT
NAME KRUSEN, WILLIAM A JR.
STREET ADDRESS 7650 COURTNEY CAMPBELL CAUSEWAY 112
CITY-ST-ZIP TAMPA FL 33607 ☐ Delete

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

TITLE DC
NAME THAYER, BRONSON A
STREET ADDRESS 401 EAST JACKSON ST 2310
CITY-ST-ZIP TAMPA FL 33602 ☐ Delete

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

Daytime Phone #

J. KENNETH PARKER 4-18-01 864-3600

CR2E034 (10/00)