

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000059340

FILED  
Jan 23, 2003  
Secretary of State

**Entity Name:** HARVEY & ASSOCIATES ARCHITECTURE AND PLANNING, INC.

**Current Principal Place of Business:**

P.O. BOX 270719  
TAMPA, FL 33688

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 270719  
TAMPA, FL 33688

**New Mailing Address:**

**FEI Number:** 59-3311470

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HARVEY, A. REESE III  
10316 CLUB CIRCLE  
SUITE 48  
TAMPA, FL 33618 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: HARVEY, A. REESE III  
Address: 10316 CLUB CIRCLE #48  
City-St-Zip: TAMPA, FL 33618 HL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: A. REESE HARVEY 111

D

01/23/2003

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date