

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000065825

1. Entity Name

THE FIRST AMERICAN INVESTMENT BANKING CORPORATIO

**FILED**  
**Jan 29, 2000 8:00 am**  
**Secretary of State**

01-29-2000 90035 041 \*\*\*150.00

Principal Place of Business 710 OAKFIELD DRIVE, SUITE 208 BRANDON FL 33511	Mailing Address 710 OAKFIELD DRIVE, SUITE 208 BRANDON FL 33511-4924
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 601 S. Harbour Island Blvd. Suite, Apt. #, etc. Suite 200	3. Mailing Address 601 S. Harbour Island Blvd. Suite, Apt. #, etc. Suite 200
City & State Tampa, FL.	City & State Tampa, FL.
Zip 33602	Country United States

4. FEI Number 59-3333062	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LANE, TOMMY B  
 710 OAKFIELD DRIVE, SUITE 208  
 BRANDON FL 33511

7. Name and Address of New Registered Agent.

Name: Geoffrey Todd Hodges  
 Street Address (P.O. Box Number is Not Acceptable): 601 South Harbour Island Boulevard  
 Suite 200  
 City: Tampa FL Zip Code: 33602

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: Geoffrey Todd Hodges 01/05/00  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 D <input checked="" type="checkbox"/> Delete	LANE, TOMMY B 11400 OAK DRIVE RIVERVIEW FL 33569
TITLE D <input checked="" type="checkbox"/> Delete	MARTIN, STEPHANIE J 11400 OAK DRIVE RIVERVIEW FL 33569
TITLE <input type="checkbox"/> Delete	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Scott Grandbouche 601 S. Harbour Island Blvd., Ste. 200 Tampa, FL. 33602
TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Ted Wlowskiak 601 South Harbour Island Blvd., Ste. 200 Tampa, FL. 33602
TITLE D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Robert Moreyra 601 S. Harbour Island Blvd., Ste. 200 Tampa, FL. 33602
TITLE VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Geoffrey Todd Hodges 601 S. Harbour Island Blvd., Ste. 200 Tampa, FL. 33602
TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	Asst Secretary Lillian Tramontano 601 S. Harbour Island Blvd., Ste. 200 Tampa, FL. 33602
TITLE <input type="checkbox"/> Change <input type="checkbox"/> 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 life empowered.

SIGNATURE: Geoffrey T. Hodges, V.P. 01/05/00  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
 813-262-2365