

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000065825

1. Entity Name

THE FIRST AMERICAN INVESTMENT BANKING CORPORATIO

Principal Place of Business

601 S HARBOUR ISLAND BLVD
STE 200
TAMPA FL 33602

Mailing Address

601 S HARBOUR ISLAND BLVD
STE 200
TAMPA FL 33602

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

HODGES, GEOFFREY T
601 S HARBOUR ISLAND BLVD
STE 200
TAMPA FL 33602

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

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

TITLE PD
NAME GRANDBOUCHE, SCOTT
STREET ADDRESS 601 S HARBOUR ISLAND BLVD., STE 200
CITY-ST-ZIP TAMPA FL 33602 ☒ Delete

TITLE VP
NAME WILOWIAK, TED
STREET ADDRESS 601 S HARBOUR ISLAND BLVD., STE 200
CITY-ST-ZIP TAMPA FL 33602 ☒ Delete

TITLE D
NAME MOREYRA, ROBERT
STREET ADDRESS 601 S HARBOUR ISLAND BLVD., STE 200
CITY-ST-ZIP TAMPA FL 33602 ☒ Delete

TITLE VP
NAME HODGES, GEOFFREY T
STREET ADDRESS 601 S HARBOUR ISLAND BLVD., STE 200
CITY-ST-ZIP TAMPA FL 33602 ☐ Delete

TITLE AS
NAME TRAMONTANO, LILLIAN
STREET ADDRESS 601 S HARBOUR ISLAND BLVD., STE 200
CITY-ST-ZIP TAMPA FL 33602 ☒ Delete

TITLE President, CEO
NAME Barbara Leschander
STREET ADDRESS 601 S. Harbour Island Blvd. #200
CITY-ST-ZIP Tampa FL 33602 ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Chief operating officer
NAME Russ Osborn
STREET ADDRESS 601 S. Harbour Island Blvd. #200
CITY-ST-ZIP Tampa FL 33602 ☐ Change ☒ Addition

TITLE President, CEO
NAME Barbara Leschander
STREET ADDRESS 601 S. Harbour Island Blvd. #200
CITY-ST-ZIP Tampa FL 33602 ☐ Change ☒ Addition

TITLE Director
NAME Frank Musolino
STREET ADDRESS 601 S. Harbour Island Blvd. #200
CITY-ST-ZIP Tampa, FL 33602 ☐ Change ☒ Addition

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

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

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 lines empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Geoffrey T. Hodges, V.P.

1/9/01

813-262-2365

Date

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)