

# 2002 UNIFORM BUSINESS REPORT (UBR)

0441982 AV

DOCUMENT # P96000021642

1. Entity Name  
BKW - HC, INC.

FILED

02 APR 11 AM 9:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
360 CENTRAL AVENUE  
ST. PETERSBURG FL 33701

Mailing Address  
360 CENTRAL AVENUE  
ST. PETERSBURG FL 33701

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3365365

Applied For  
Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

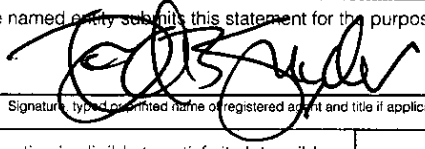
6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~DELANO, G K~~  
360 CENTRAL AVENUE  
ST. PETERSBURG FL 33701

Name David B. Snyder  
Street Address (P.O. Box Number is Not Acceptable)  
360 Central Ave.  
City St. Petersburg FL Zip Code 33701

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  David B. Snyder, Esq. 3/15/02  
Signature, typed 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, 2002 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 C ☐ Delete  
NAME MENKE, ROBERT M  
STREET ADDRESS 360 CENTRAL AVENUE  
CITY-ST-ZIP ST. PETERSBURG FL 33701

TITLE AS ☐ Change ☒ Addition  
NAME Haire, Nancy C.  
STREET ADDRESS 360 Central Ave.  
CITY-ST-ZIP St. Petersburg, FL 33701

TITLE D ☐ Delete  
NAME MEEHAN, DAVID K  
STREET ADDRESS 360 CENTRAL AVENUE  
CITY-ST-ZIP ST. PETERSBURG FL

TITLE AS ☐ Change ☒ Addition  
NAME Southey, Robert G.  
STREET ADDRESS 360 Central Ave.  
CITY-ST-ZIP St. Petersburg, FL 33701

TITLE DT ☐ Delete  
NAME HUSSEMAN, EDWIN C  
STREET ADDRESS 360 CENTRAL AVENUE  
CITY-ST-ZIP ST. PETERSBURG FL 33701

TITLE VP, S ☐ Change ☒ Addition  
NAME Snyder, David B.  
STREET ADDRESS 360 Central Ave.  
CITY-ST-ZIP St. Petersburg, FL 33701

TITLE DS ☒ Delete  
NAME DELANO, G K  
STREET ADDRESS 360 CENTRAL AVENUE  
CITY-ST-ZIP ST. PETERSBURG FL 33701

TITLE ☐ Change ☐ Addition  
NAME 900005389709  
STREET ADDRESS -04/30/02--01020--001  
CITY-ST-ZIP \*\*\*7972.75 \*\*\*\*150.00

TITLE P ☐ Delete  
NAME KURCAN, STEVEN K  
STREET ADDRESS 360 CENTRAL AVENUE  
CITY-ST-ZIP ST. PETERSBURG FL 33701

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

TITLE VC ☒ Delete  
NAME MENKE, ROBERT G  
STREET ADDRESS 360 CENTRAL AVE  
CITY-ST-ZIP ST PETERSBURG FL

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:  Nancy C. Haire 3/15/02 727 823-4000  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Assistant Secretary Date Daytime Phone #

CR2E034 (9/01)