

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000030138

1. Entity Name

J A MONTRONE & ASSOCIATES, INC.

FILED

Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90084 008 ***150.00

Principal Place of Business

Mailing Address

J A MONTRONE & ASSOCIATES INC
4634 CENTRAL AVE
ST PETERSBURG FL 33711
US

8711 BLIND PASS ROAD, #309
ST. PETERSBURG BEACH FL 33706-1464

2. Principal Place of Business

3. Mailing Address

6305 AUGUSTA BLVD.
Suite, Apt. #, etc.

6305 AUGUSTA BLVD.
PO Box 8802
Suite, Apt. #, etc.

City & State
SEMINOLE FL

City & State
SEMINOLE FL

Zip
33777
Country
PINELLAS

Zip
33775
Country
PINELLAS



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3371283

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

MONTRONE, JOYCE A
8711 BLIND PASS ROAD, #309
ST. PETERSBURG BEACH FL 33706

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PVST
MONTRONE, JOYCE A
8711 BLIND PASS ROAD, #309
ST. PETERSBURG BEACH FL 33706 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
6305 AUGUSTA BLVD.
SEMINOLE, FL 33777 ☒ Change ☐ Addition ☐ Address only

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MONTRONE, JOSEPH JR
8711 BLIND PASS ROAD, #309
ST. PETERSBURG BEACH FL 33706 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
6305 AUGUSTA BLVD.
SEMINOLE, FL 33777 ☒ Change ☐ Addition ☐ Address only

TITLE
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☐ Change ☐ Addition

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☐ Delete

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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)