

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000078535

1. Entity Name

BFD OF PINELLAS, INC.

**FILED**  
**Mar 21, 2000 8:00 am**  
**Secretary of State**

03-21-2000 90093 022 \*\*\*150.00

Principal Place of Business 37160 U.S. 19 NO. PALM HARBOR FL 34684 US	Mailing Address 37160 U.S. 19 NO. PALM HARBOR FL 34684 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-3401793	Applied For <input type="checkbox"/> Not Applicable
Zip	Country	Zip	Country



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent <b>TICHENOR, RONALD G</b> 20 FRESHWATER DRIVE PALM HARBOR FL 36484	7. Name and Address of New Registered Agent Name <b>TICHENOR RONALD G</b> Street Address (P.O. Box Number is Not Acceptable) <b>700 BAYSHORE DR.</b> City <b>TARPON SPRINGS</b> FL Zip Code <b>34689</b>
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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]* **PRESIDENT RONALD G TICHENOR** 2-10-00  
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) <input type="checkbox"/>	<b>FILE NOW!!! FEE IS \$150.00</b> <b>After MAY 1, 2000 Fee will be \$550.00</b> <b>Make Check Payable to Department of State</b>	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
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11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>TICHENOR, RONALD G</b> <b>20 FRESHWATER DRIVE</b> <b>PALM HARBOR FL 36484</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SAME</b> <b>700 BAYSHORE DRIVE</b> <b>TARPON SPRINGS FL 34689</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>TICHENOR, BRANDI</b> <b>20 FRESHWATER DRIVE</b> <b>PALM HARBOR FL 36484</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>SAME</b> <b>700 BAYSHORE DRIVE</b> <b>TARPON SPRINGS FL 34689</b>
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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]* **RONALD G TICHENOR** 2-10-00  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)