

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000094926

1. Entity Name
STEVEN G. BURTON, P.A.

Principal Place of Business

101 E. KENNEDY BLVD
1165
TAMPA FL 33602

Mailing Address

P.O. BOX 172069
TAMPA FL 33672

2. Principal Place of Business

100 N. Tampa St.

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.
3500

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3410207

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BURTON, STEVEN G ESQ
101 E. KENNEDY BLVD
STE 1165
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

100 N Tampa St

#3500

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, 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPVT BURTON, STEVEN G 101 E. KENNEDY BLVD, #1165 TAMPA FL 33602	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	100 N. Tampa St, #3500	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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 like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Aug 04, 2002 8:00 am
Secretary of State

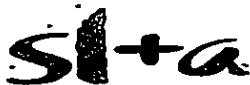
07-04-2002 90562 018 ***150.00

40447



DO NOT WRITE IN THIS SPACE

CR2E034 (9/01)



SIMMONS, LAPLANT & ASSOCIATES
Certified Public Accountants

Attachment
F.D.A.

096000094926 740447

201 East Kennedy Boulevard
Suite 715
Tampa, FL 33602-5828
813-229-2090
813-223-7104 fax
www.simmonslaplant.com

MEMORANDUM

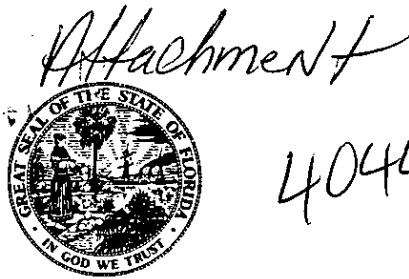
TO: Division of Corporations
Uniform Business Report Filings

FROM: Mary Simmons, C.P.A. *MS*

DATE: June 26, 2002

SUBJECT: Enclosed Report

The enclosed was found in our files. Please accept as timely filed. Your cooperation is greatly appreciated.



40447

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

July 23, 2002

STEVEN G. BURTON, P.A.
POST OFFICE BOX 3310
TAMPA, FL 33601-3310

SUBJECT: STEVEN G. BURTON, P.A.
Ref. Number: P96000094926

The enclosed letter and/or attachment(s) was/were returned to this office by the United States Postal Service due to an incorrect mailing address. Because the attached documentation reflects you are associated with this entity, we are forwarding these documents to you for appropriate handling.

To insure this entity receives any future notices, it is imperative that this entity notify this office of its correct mailing address. PLEASE REVISE THE ENCLOSED DOCUMENT TO REFLECT THE CORRECT MAILING ADDRESS BEFORE RETURNING IT TO THIS OFFICE FOR PROCESSING.

Should you have any questions concerning this matter, you may contact our office by calling (850) 488-9000.

Division of Corporations

Letter Number: 202A00044790

New
Address

Steven G. Burton, PA
100 N. Tampa Street
Suite 3500
Tampa, FL 33602

Attachment

40447

FF P96000094 926

Please refer
to note attached
from the
accountant.