

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000103249

1. Entity Name

VANCE TAX & FINANCIAL SERVICES, INC.

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90075 008 ***150.00

Principal Place of Business

2135 NE COTCHMAN RD

CLEARWATER FL 33765

US

Mailing Address

2135 NE COTCHMAN RD

CLEARWATER FL 33765-2016

US

2. Principal Place of Business

2650 Tampa Road

Suite, Apt. #, etc.

B

City & State
Palm Harbor FL

Zip
34684

Country
US

3. Mailing Address

2650 Tampa Road

Suite, Apt. #, etc.

B

City & State
Palm Harbor FL

Zip
34684

Country
US



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3415723

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AMERILAWYER CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134

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, 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

TITLE PSTD
NAME VANCE, TIMOTHY L
STREET ADDRESS 2135 NE COTCHMAN RD STE 4
CITY-ST-ZIP CLEARWATER FL 33765

☐ Delete

TITLE VD
NAME BRIGHT, MARVIN R
STREET ADDRESS 2135 NE COTCHMAN RD STE 4
CITY-ST-ZIP CLEARWATER FL 33765

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 2650 Tampa Rd. Unit B
CITY-ST-ZIP Palm Harbor FL 34684

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 2650 Tampa Rd. Unit B
CITY-ST-ZIP Palm Harbor FL 34684

☐ Change ☐ Addition

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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 like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

727-187-9884

CR2E034 (9/99)