

## 2000 UNIFORM BUSINESS REPORT (UBR)

3/1

DOCUMENT # P97000042632

1. Entity Name

BULLARD-NEWSOME, INC.

**FILED**  
**May 02, 2000 8:00 am**  
**Secretary of State**

03-14-2000 90063 009 \*\*\*150.00

Principal Place of Business

Mailing Address

2325 ULMERTON ROAD  
 SUITE 20  
 CLEARWATER FL 34622

2325 ULMERTON ROAD  
 SUITE 20  
 CLEARWATER FL 33762-3373

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

65-0863249

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

MORRIS, GREGORY D  
 2325 ULMERTON ROAD  
 SUITE 20  
 CLEARWATER FL 34622

Name

THOMAS G SCHULTZ

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

2325 ULMERTON ROAD, #20

City

CLEARWATER

FL

Zip Code

33762

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

THOMAS G SCHULTZ  
 1/26/00

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 ☐ Delete  
 NAME D  
 STREET ADDRESS BULLARD, FRED B JR  
 CITY-ST-ZIP 2325 ULMERTON ROAD, SUITE 20  
 CLEARWATER FL 34622

TITLE ☒ Delete  
 NAME D  
 STREET ADDRESS NEWSOME, M R  
 CITY-ST-ZIP 2325 ULMERTON ROAD, SUITE 20  
 CLEARWATER FL 34622

TITLE ☒ Delete  
 NAME V  
 STREET ADDRESS MORRIS, GREGORY D  
 CITY-ST-ZIP 2325 ULMERTON ROAD, SUITE 20  
 CLEARWATER FL 34622

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
 NAME VP  
 STREET ADDRESS THOMAS SCHULTZ  
 CITY-ST-ZIP 2325 ULMERTON RD STE 20  
 CLEARWATER, FLA 33762

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

THOMAS G SCHULTZ  
 1/26/00

727-540-0009

CR2E034 (9/99)