

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000050862

1. Entity Name

CROMWELL, PFAFFENBERGER, BARNER & GRIFFIN, P.A.

FILED
Apr 11, 2001 8:00 am
Secretary of State

04-11-2001 90138 048 ***158.75

Principal Place of Business

631 US HWY. 1. STE. 410
N. PALM BEACH FL 33408

Mailing Address

631 US HWY. 1. STE. 410
N. PALM BEACH FL 33408

2. Principal Place of Business

11780 US HWY 1

Suite, Apt. #, etc.

SUITE 300

City & State

N. PALM BEACH FLA.

Zip

33408

Country

3. Mailing Address

11780 US HWY 1

Suite, Apt. #, etc.

SUITE 300

City & State

NORTH PALM BEACH FLA

Zip

33408

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0751031

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GRIFFIN, LAWRENCE C

631 US HWY. 1. STE. 410

N. PALM BEACH FL 33408

7. Name and Address of New Registered Agent

Name

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

11780 US HWY ONE

SUITE 300

City

NORTH PALM BEACH

FL

Zip Code

33408

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] (LAWRENCE C GRIFFIN V.P.)

(NOTE: Registered Agent signature required when reinstating)

DATE

April 4, 2001

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, 2001 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 PD
NAME PFAFFENBERGER, WILLIAM J
STREET ADDRESS 304 KELSEY PARK CIR.
CITY-ST-ZIP PALM BEACH GARDENS FL 33410 ☐ Delete

TITLE VPSD
NAME GRIFFIN, LAWRENCE C
STREET ADDRESS 18760 SE RIVER RIDGE RD.
CITY-ST-ZIP TEQUESTA FL 33469 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

TITLE
NAME
STREET ADDRESS
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] V.P. (LAWRENCE C GRIFFIN V.P.) April 4, 2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

561-627-8100

CR2E034 (10/00)

0287448