

2001 UNIFORM BUSINESS REPORT (UBR)

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

05-11-2001 90022 011 ***150.00

DOCUMENT # P97000060321

1. Entity Name

STERNSTEIN, RAINER & CLARKE, P.A.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
101 NORTH GADSDEN STREET
~~314 NORTH CALHOUN STREET~~
TALLAHASSEE FL 32301

Mailing Address
101 NORTH GADSDEN STREET
~~314 NORTH CALHOUN STREET~~
TALLAHASSEE FL 32301

2. Principal Place of Business

101 North Gadsden Street

Suite, Apt. #, etc.

3. Mailing Address

101 North Gadsden Street

Suite, Apt. #, etc.

City & State
Tallahassee FL

Zip Country
32301 LEON

City & State
Tallahassee FL

Zip Country
32301 LEON

4. FEI Number **59-3456778**

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

STERNSTEIN, GERALD B ESQ
~~314 NORTH CALHOUN STREET~~ **101 NORTH GADSDEN STREET**
TALLAHASSEE FL 32301

Name **Sternstein, Gerald B. Esq.**
 Street Address (P.O. Box Number is Not Acceptable)
101 North Gadsden Street
 City **Tallahassee** **FL** Zip Code **32301**

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 re-stating)

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
 NAME **STERNSTEIN, GERALD B ESQ**
 STREET ADDRESS ~~314 N. CALHOUN STREET~~ **101 North Gadsden St.**
 CITY-ST-ZIP **TALLAHASSEE FL 32301**

TITLE **P/D** ☒ Change ☐ Addition
 NAME **Gerald B. Sternstein, Esq.**
 STREET ADDRESS **101 North Gadsden Street**
 CITY-ST-ZIP **Tallahassee, FL. 32301**

TITLE **VD** ☐ Delete
 NAME **RAINER, FRANK P ESQ**
 STREET ADDRESS ~~4565 BARCLAY LANE~~ **101 North Gadsden St.**
 CITY-ST-ZIP **TALLAHASSEE FL 32308**

TITLE **V/D** ☒ Change ☐ Addition
 NAME **FRANK P. Rainer, Esq.**
 STREET ADDRESS **101 North Gadsden Street**
 CITY-ST-ZIP **Tallahassee, FL. 32301**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 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

4/27/01 **850/577-6557**
 Date Daytime Phone #

CR2E034 (10/00)