

# 2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 26, 2000 8:00 am  
Secretary of State

01-26-2000 90121 007 \*\*\*150.00

DOCUMENT # P97000060539

1. Entity Name

ALAN JOHN CLARK, P.A.

Principal Place of Business

Mailing Address

1989 SO. FEDERAL HIGHWAY, 1  
SUITE 204  
STUART FL 34994

1989 SO. FEDERAL HIGHWAY, 1  
SUITE 204  
STUART FL 34994-3949

2. Principal Place of Business

8842 SE SANDCASTLE circle 8842 SE SANDCASTLE  
Suite, Apt. #, etc. CIRCLE

3. Mailing Address

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

HOBE SOUND, FL

City & State

HOBE SOUND, FL

4. FEI Number

65-0768559

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

CLARK, ALAN JOHN  
1989 SO. FEDERAL HIGHWAY, 1  
SUITE 204  
STUART FL 34994

CHANGING  
ADDRESS ONLY

Name

CLARK, ALAN JOHN

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

8842 SE SANDCASTLE CIRCLE

City

HOBE SOUND

FL

Zip Code 33455

8. The above named entity admits 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

1/19/2000

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 PD  
NAME CLARK, ALAN JOHN  
STREET ADDRESS 1989 SO. FEDERAL HIGHWAY, 1, SUITE 204  
CITY-ST-ZIP STUART FL 34994

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS 8842 SE SANDCASTLE CIRCLE  
CITY-ST-ZIP HOBE SOUND, FL 33455

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
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 an other title empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/19/2000 561-223-0307  
Date Daytime Phone #