

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000081517
1. Entity Name
 COLE, SCOTT & KISSANE, P.A.

FILED
 01 DEC 17 AM 9:47
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business **Mailing Address**
 1390 BRICKELL AVENUE 1390 BRICKELL AVENUE
 3RD FLOOR 3RD FLOOR
 MIAMI, FLORIDA 33131 MIAMI, FLORIDA 33131

2. Principal Place of Business **3. Mailing Address**
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 City & State City & State

4. FEI Number **Applied For**
 65-0792149 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**

FELUREN, MARK S.
 100 SE 3RD AVE., STE. 1500
 FT. LAUDERDALE, FL 33394

Name: COLE, RICHARD P.
 Street Address (P.O. Box Number is Not Acceptable): 1390 BRICKELL AVENUE
 3RD FLOOR
 City: MIAMI **FL** Zip Code: 33131

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: *Richard P. Cole* RICHARD P. COLE OCTOBER 19, 2001
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. **FILE NOW!!! FEE IS \$150.00 After MAY 1, 2001 Fee will be \$350.00 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 NAME STREET ADDRESS CITY-ST-ZIP	D BILLBROUGH, G. BART 1 FINANCIAL PLAZA, STE. 1500 FT. LAUDERDALE, FL 33394 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLE, RICHARD P. 1390 BRICKELL AVENUE, 3RD FLOOR MIAMI, FL 33131 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 400004729344-0 -12/17/01--01068--018 ***131.25 *****61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WHITE, III J.G. 222 LAKEVIEW AVENUE, SUTIE 210 WEST PALM BEACH, FL 33401 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCOTT, JR., THOMAS E. 1390 BRICKELL AVENUE, 3RD FLOOR MIAMI, FLORIDA 33131 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KISSANE, EUGENE P. 1390 BRICKELL AVENUE, 3RD FLOOR MIAMI, FLORIDA 33131 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: *Richard P. Cole* RICHARD P. COLE, Director

CR2E034 (11/00)

DEC 17 2001