

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000103847

1. Entity Name

DAVID C. CORY, P.A.

**FILED**  
**Feb 04, 2000 8:00 am**  
**Secretary of State**

02-04-2000 90018 011 \*\*\*150.00

Principal Place of Business

Mailing Address

601 E TWIGGS ST. SUITE 400  
TAMPA FL 33602

601 E TWIGGS ST. SUITE 400  
TAMPA FL 33602-3922

2. Principal Place of Business

2105 Haydon Ct.

3. Mailing Address

P.O. Box 3975

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Brandon FL

City & State

Brandon FL

4. FEI Number

59-3481054

Applied For

Not Applicable

Zip

33511

Country

USA

Zip

33509-3975

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CORY, DAVID C  
601 E TWIGGS ST, SUITE 400  
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name

CORY, DAVID C.

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

2105 Haydon Court

City

Brandon

FL

Zip Code

33511

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]*  
Signature, typed or printed name of registered agent and title, if applicable.

DAVID C. CORY, Pres & Reg. Agent

1-27-00

(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. ☒  
(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 PTSD ☐ Delete  
NAME CORY, DAVID C  
STREET ADDRESS 601 E TWIGGS ST SUITE 400  
CITY-ST-ZIP TAMPA FL 33602

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 ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTSD ☒ Change ☐ Addition  
NAME CORY, DAVID C.  
STREET ADDRESS 2105 HAYDON COURT  
CITY-ST-ZIP BRANDON FL 33511

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]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DAVID C. CORY, Pres.

1-27-00

(813) 657-8107

Date

Daytime Phone #

CR2E034 (9/99)