2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR P

TED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Feb 03, 2001 8:00 am Secretary of State DOCUMENT # P9800005087 SPRING PARK GROUP OF PINELLAS, INC. 02-03-2001 90059 044 ***150.00 Principal Place of Business Mailing Address 1700 MCMULLEN BOOTH RD 1700 MCMULLEN BOOTH RD CLEARWATER FL 33759 CLEARWATER FL 33759 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State Applied For 4. FEI Number 59-3489160 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PUZZITIELLO, ROSS A Street Address (P.O. Box Number is Not Acceptable) 4153 ARLINGTON DR PALM HARBOR FL 34685 Zip Code FL 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 reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Addition ☐ Change TITLE ☐ Delete TITLE PUZZITIELLO, RICHARD A NAME NAME STREET ADDRESS 1700 MCMULLEN BOOTH RD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33759** ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NIERLICH, JOHN K NAME STREET ADDRESS STREET ADDRESS 1700 MCMULLEN BOOTH RD CITY-ST-7IP CITY-ST-ZIP **CLEARWATER FL 33759** ☐ Addition ☐ Change D_Delete _ TITLE TITLE PUZZITIELLO, RICHARD JR. NAME NAME STREET ADDRESS STREET ADDRESS 13370 PROSPECT RD CITY-ST-ZIP CITY-ST-ZIP STRONGSVILLE OH 44136 Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME PUZZITIELLO. ROSS A STREET ADDRESS STREET ADDRESS 1700 MCMULLIN BOOTH RD CITY-ST-ZIP CITY-ST-ZIP **CLEARWATER FL 33759** ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 of trustee impowered 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.