2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P98000014879

Mailing Address

1. Entity Name

Principal Place of Business

LANDMARK FINANCIAL HOLDING COMPANY

3939 MCINTOSH RD SARASOTA FL 34209		3939 MCINTOSH RD SARASOTA FL 34209							
	Place of Business	3. Mailing Address							
	S. Washington Blvd.	P.O. Box 5737							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & Sta Sara	^{ite} asota, FL	City & State Sarasota, FL			58-2384540			Applied For Not Applicable	
Zip	Country	Zip	Country	····	- C	. 5	\$9.75		
3423		34277	US	A	5. Certificate of St	atus Desired [Fee Requir		
	6. Name and Address of Current	Registered Agent			7. Name and Add	ress of New Regist	ered Agent		
-	THOMAS G NTOSH ROAD			Name QI Street Address 54	JALE, THOMAS s (P.O. Box Number is N 44 S. WASHING	G lot Acceptable) TON BLVD.	·		
SARASOT	TA FL 34233								
#	r T			City S.A	ARASOTA		FL Zip Co.	de 4236	
signature	e named entity submits this statement fortions of registered agent. Signature, typed or prigted name of registered agent FILE NOW!!! FEE IS \$150.00 FMAY 1, 2003 Fee will be \$550.00				ired when reinstating)		I am familiar with	, and accept	
Make Check	k Payable to Florida Department o					nd Contribution.	Adde	d to Fees	
10.	OFFICERS AND		11.	····		NGES TO OFFICERS	S AND DIRECTOR		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PENNINGTON, GERALD L 285 SUGAR MILL DRIVE OSPREY FL 34229	☐ Delete	TITLE : NAME : STREET AL : CITY-SY-:	DDRESS 5.	NNETTEE AYER 40 N. CASEY 1 SPREY, FL 34	KEY ROAD	☐ Change	XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PEIFER, CHRIS A 16308 VILLARREAL TAMPA FL 33613	☐ Delete	TITLE NAME STREET AC	D JORESS 1	*	E, M.D. FREET	☐ Change	XX Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Willis, Issac H M.D. 3280 Howell Mill RD, Ste 342 Atlanta Ga 30327	Delete	TITLE NAME STREET AD CITY-ST-2	D KA	ATHLEEN TOALI 918 AVENUE EA	E AST	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D QUALE, THOMAS G 3939 MCINTOSH ROAD SARASOTA FL 34233	☐ Delete	TITLE NAME STREET AD CITY-ST-2	DRESS	OLMES BEACH,	<u> </u>	☐ Change	☐ Addition	
TITLE NAME Street address City-St-Zip	D RAYMOND, SUPLEE T 1742 SEMINOLE DRIVE SARASOTA FL 34236	☐ Delete	TITLE NAME STREET AD CITY-ST-2	Į.	-		☐ Change	Addition	
TITLE NAME Street address City-St-Zip	D DABNEY, THOMAS G 4600 CAMINO REAL SARASOTA FL 34231	☐ Delete	TITLE NAME STREET AD CITY-ST-2				Change	Addition	

Apr 07, 2003 8:00 am Secretary of State
04-07-2003 90731 012 ***150.00

on Blvd.	P.O. Box 57	27				., ,,, ,	1011 1021		
OH DIVE.	Suite, Apt. #, etc.	<i>31</i>		_					
	2010, r.pc. 11, 000.			CHECK HERE IF MAKING CHANGES					
- " <u>-</u> "		4	. FEI Number	r	Appli	ed For			
	'L	'	58-2384540	ţ	Not Applicable				
ntry	Zip	Country		0	\$8.7	5 Additio			
ISA	34277	USA	5	. Certificate of Status Desired		equired	riai		
idress of Current I	Registered Agent		7	Name and Address of New Re	egistered Agent				
		Name							
		Stroot	QUALI	E. THOMAS G	<u> </u>		n=		
		Sireet	544	Box Number is Not Acceptable NASHINGTON BLVI	5.				
		City	SARAS	гота	FL Zi	p Code 3423	36		
s this statement for	the purpose of changing it	s registered office		agent, or both, in the State of Flo	I rida. I am familiar				
ent.		•	ŭ				-1		
name of registered agent a	nd title if applicable. (NC	TE: Registered Agent sign	ature required whe	n reinstating)	DATE		—		
10, 6450, 00	1								
IS \$150.00 will be \$550.00			9. Election Campaig			n Financing _ \$5.00 May Be			
a Department of	State			Trust Fund Contribution		Added to			
OFFICERS AND	<u> </u>	11.		 ADDITIONS/CHANGES TO OFFI	OFRE AND DIREC	TODO IN	4.4		
OFFICENS AND L		11TLE	<u>Тъ</u>	ADDITIONS/CHANGES TO OFFI					
RALD L	Delete	MAME	1 -	TOTE AND C	☐ Ch	iange <u>x</u>	X Addition \ 8		
DRIVE		STREET ADDRESS	1	TTEE AYERS			3		
9		CITY-ST-ZIP	740	N. CASEY KEY ROAD]		
	☐ Delete	TITLE	D	EY, FL 34229		anno VE	X Addition		
	□ Delete	NAME	-	M COURTE M D		ange A	AAddition		
L		STREET ADDRESS		M. STEELE, M.D.					
14.		CITY-ST-ZIP		ROLAND STREET					
•	☐ Delete	TITLE	D	SOTA, FL 34231	☐ Ch	ange X	Addition		
M.D.	±	N'AME	,	LEEN TOALE					
LL RD, STE 342		STREET ADDRESS							
27		CITY-ST-ZIP		AVENUE EAST	7	•			
	☐ Delete	TITLE	T RULL	ES BEACH, FL 3421	/ □ Ch	ange [Addition		
G		NAME			_	_			
ROAD		STREET ADDRESS							
233		CITY-ST-ZIP							
	☐ Delete	TITLE			☐ Ch.	ange [Addition		
ΕT		NAME .							
DRIVE		STREET ADDRESS							
236	·	CITY-ST-ZIP	ļ						
	☐ Delete	TITLE			☐ Cha	ange 🗀] Addition		
S.G		NAME					1		
AL .		STREET ADDRESS					\		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: