7		•		
2001	UNIFORM	BUSINESS	REPORT	(UBR

DOCUMENT # P98000016346 1. Entity Name BRISBEN FLORIDA, INC.										
						FILED				
Principal Phase of Durings						01 APR 30 AM II: 43				
Principal Place of Business Mailing Address 7800 EAST KEMPER ROAD 7800 EAST KEMPER ROAD							SECR	ETARY 0	TATO	F
CINCINNATI OH 45249 CINCINNATI OH 45249							TALLA	HASSEE,	FLORI	ĎΑ
2. Principal Place of Business		3. Mailing Address	3. Mailing Address					DON'I EDEDI ILDI		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.				DO NOT WRI	TE IN THIS SF	ACE	
City & State		City & State	City & State			4. FEI Numbe	58-237609	3	<u> </u>	oplied For ot Applicable
Zip	Country	Zip	Coun	try		5. Certificate	of Status Desired		8.75 Addes Require	
	6. Name and Address of Curr	rent Registered Agent		NI		7. Name and	Address of New F	Registered Ag	ent	
ATKINSON, WILSON C III C/O ATKINSON, DINER, STONE & MANKUTA, PA				Name Street Ad	ddress (P		r is Not Acceptabl	**************************************	em	
1946 TYLER STREET HOLLYWOOD FL 33022		ार ा	:	190	<u> </u>	; PINI	elet s		Zio Code	e1
		. ,		· Y	1911	10146F	<u> </u>	FL	33	324
8. The above	named entity submits this stateme	nt for the purpose of changing its	registere	ed office or	registere	ed agent, or bot	h, in the State ^l of Fl	orida.		
SIGNATURE Land Count Carol Record Assistant Secretary Date Onte Registered Agent signature requestered agent and title if applicable.										
9 This corpo	oration is aligible to satisfy its Intano	gible FILE NOW!	! FEE				F		4-4	
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) Tax filing requirement and elects to do so. After MAY-1, 2001)1 Fee	will be \$5	50.00	Tru	ction Campaign Fir st Fund Contributio			May Be I to Fees
11.		AND DIRECTORS	12.				CHANGES TO OFF			
	VST BRISBEN, WILLIAM O	☐ Delete	TITLE		29S	t hale la	Mismo	•	Change	☐ Addition
	23 NORTH BEACH ROAD			et address	780	fess c	Kemper	BOOGET		
CITY-ST-ZIP	HOBE SOUND FL 33455		CITY	-ST-ZIP	CVM	<u>oinna</u>	u'OH, de	<u> </u>		
TITLE		☐ Delete	TITLE		Sort	Jes ?	wheat E	·-	Change	Addition
NAME STREET ADDRESS				ET ADDRESS	780	O Esol	Kember	BOOK		
CITY-ST-ZIP			CITY-	-ST-ZIP	031	roinns	4, DH -	15249	· ·	
TITLE		☐ Delete	TITLE		10 +2	. 80	00004		Change	Addition
NAME STREET ADDRESS				ET ADDRESS	ä,			/0101 <u> </u>		
CITY-ST-ZIP		· Mil Lighter	CITY-	-ST-ZIP		.,	· ****1	20.00	****15	
TITLE		☐ Delete	TITLE					,	Change	Addition
NAME STREET ADDRESS			NAMI STRE	ET ADDRESS						
CITY-ST-ZIP	40407		CITY	-ST-ZIP						
TITLE		☐ Delete	TITLE					I	Change	☐ Addition
NAME STREET ADDRESS			NAME STRE	E Et address						
CITY-ST-ZIP				-ST-ZIP						
TITLE		☐ Delete	TITLE						Change	☐ Addition
NAME STREET ADDRESS			NAME STRE	ET ADDRESS				Ta	ز	
CITY-ST-ZIP				-ST-ZIP						
13. I hereby certify that the information supplied with this filling 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 and TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DIRECT										