

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000021894

1. Entity Name

T.L. YOUNG & COMPANY, INC.

Principal Place of Business

1304 SHOREWOOD DR
ORLANDO FL 32806
US

Mailing Address

1304 SHOREWOOD DR
ORLANDO FL 32806
US

2. Principal Place of Business

1625 Hackney Ave.

3. Mailing Address

1625 Hackney Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando FL

City & State

Orlando FL

Zip

32806

Country

USA

Zip

32806

Country

USA

4. FEI Number 59-3505223

Applied For

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

HAGGARD, GUY S ESQ
201 EAST PINE STREET
SUITE 1200
ORLANDO FL 32801

Name

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

City

FL

Zip Code

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 reinstalling)

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
YOUNG, TIMOTHY L
1304 SHOREWOOD DR
ORLANDO FL 32806

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Chairman, President & CEO
Timothy L. Young
1625 Hackney Ave.
Orlando, FL 32806

☒ Change

☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
TOMLINSON, KELLY F
1911 THUNDERBIRD TR
MAITLAND FL 32751

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE
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STREET ADDRESS
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TITLE
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STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/20/01

Date

407-492-1615

Daytime Phone #

FILED
Sep 06, 2001 8:00 am
Secretary of State

09-06-2001 90259 034 ***550.00

00083715



DO NOT WRITE IN THIS SPACE

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CR2E034 (10/00)