

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000028245

1. Entity Name

ECHELON GATEWAY, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90610 050 ***150.00

Principal Place of Business

450 CARILLON PARKWAY
STE 200
ST PETERSBURG FL 33701

Mailing Address

450 CARILLON PARKWAY
STE 200
ST PETERSBURG FL 33716-1290

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3500511

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, SUSAN G
450 CARILLON PARKWAY
ST PETERSBURG FL 33716

7. Name and Address of New Registered Agent

Name

Susan G. Johnson

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

450 Carillon Parkway, Suite 200

City

St. Petersburg

FL

Zip Code

33716

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)

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 DP ☒ Delete
NAME HIGGINS, RAYMOND F
STREET ADDRESS 450 CARILLON PARKWAY STE 200
CITY-ST-ZIP ST PETERSBURG FL 33716

TITLE DVS ☒ Delete
NAME JOHNSON, SUSAN G
STREET ADDRESS 450 CARILLON PARKWAY STE 200
CITY-ST-ZIP ST PETERSBURG FL 33716

TITLE DVT ☒ Delete
NAME HOBBS, JAMES R
STREET ADDRESS 450 CARILLON PARKWAY STE 200
CITY-ST-ZIP ST PETERSBURG FL 33716

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 SVP/D ☒ Change ☐ Addition
NAME Susan G. Johnson
STREET ADDRESS 450 Carillon Parkway, Suite 200
CITY-ST-ZIP St. Petersburg, FL 33716

TITLE V/D ☒ Change ☐ Addition
NAME James R. Hobbs, Jr.
STREET ADDRESS 450 Carillon Parkway, Suite 200
CITY-ST-ZIP St. Petersburg, FL 33716

TITLE V/D ☐ Change ☒ Addition
NAME Thomas D. Wilson
STREET ADDRESS 450 Carillon Parkway, Suite 200
CITY-ST-ZIP St. Petersburg, FL 33716

TITLE AVP/S ☐ Change ☒ Addition
NAME Amy L. Crisp
STREET ADDRESS 450 Carillon Parkway, Suite 200
CITY-ST-ZIP St. Petersburg, FL 33716

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:

Susan G. Johnson, Senior Vice President

Date

Daytime Phone #

727-803-8200