

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 09, 2002 8:00 am
Secretary of State

09-09-2002 90025 018 ***558.75

DOCUMENT # P98000030824

1. Entity Name
SPENCER PHILLIPS, INC.

Principal Place of Business

**5218 126TH AVE NORTH
 CLEARWATER FL 33760**

Mailing Address

**P.O. BOX 1025
 LARGO FL 33779-1025**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

5218 126th Ave North

Suite, Apt. #, etc.

**City & State
 Clearwater, FL**

**Zip
 33760**

**Country
 USA**

4. FEI Number 59-3502577

**Applied For
 Not Applicable**

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**PHILLIPS, CHRISTOPHER
 5218 126TH AVE NORTH
 CLEARWATER FL 33760**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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 \$550.00
 After September 13, 2002 Fee will be \$750.00
 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 **PHILLIPS, CHRISTOPHER B**
STREET ADDRESS **5218 126TH AVE NORTH**
CITY-ST-ZIP **CLEARWATER FL 33760**

TITLE **DVP** ☐ Delete
NAME **SPENCER, JAMES**
STREET ADDRESS **5218 126TH AVE NORTH**
CITY-ST-ZIP **CLEARWATER FL 33760**

TITLE **VP** ☐ Delete
NAME **PHILLIPS, DIANE**
STREET ADDRESS **5218 126TH AVE N.**
CITY-ST-ZIP **CLEARWATER FL 33760**

TITLE **VP** ☒ Delete
NAME **LEE, JACQUELINE**
STREET ADDRESS **5218 126TH AVE N.**
CITY-ST-ZIP **CLEARWATER FL 33760**

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 **Vice President** ☐ Change ☒ Addition
NAME **Kevin Shipp**
STREET ADDRESS **5218 126th Ave North**
CITY-ST-ZIP **Clearwater FL 33760** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
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NAME
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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: SIGNATURE REQUIRED

9/02/02

727 556 0700

SIGNATURE OF REGISTERED AGENT OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/02)