

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 02, 2001 08:00 AM**
Secretary of State**DOCUMENT # P98000039244**1. Entity Name
ADVANTIS CONSTRUCTION COMPANY**Principal Place of Business**

1650 PRUDENTIAL DRIVE #400

JACKSONVILLE

32207

FL

Mailing Address

1650 PRUDENTIAL DRIVE

SUITE 400 ATTN - LEGAL DEPT

JACKSONVILLE

32207

FL

2. Principal Place of Business

1650 PRUDENTIAL DRIVE #400

3. Mailing Address

1650 PRUDENTIAL DRIVE SUITE 400

Suite, Apt. #, etc.

Suite, Apt. #, etc.

ATTN - LEGAL DEPT

City & State

JACKSONVILLE

FL

City & State

JACKSONVILLE

FL

Zip

32207

Country

US

Zip

32207

Country

US

4. FEI Number**59-3508974**

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**KENNEDY ALLISON D**
1650 PRUDENTIAL DRIVE #400

JACKSONVILLE

32207

FL

US

7. Name and Address of New Registered Agent

Name

HENDERSON ALISON K

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

1650 PRUDENTIAL DRIVE

SUITE 400

City

JACKSONVILLE

FL

Zip Code

32207

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 **ALISON K. HENDERSON****03/02/2001**

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, 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**

TITLE	SVP	☐ Delete
NAME	REGAN MICHAEL N	
STREET ADDRESS	1650 PRUDENTIAL DR SUITE 400	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	SVP	☐ Delete
NAME	APPERSON ERIC	
STREET ADDRESS	3455 PEACHTREE RD NE 400	
CITY-ST-ZIP	ATLANTA GA 30326	
TITLE	CFO	☐ Delete
NAME	SNYDER M BRUCE	
STREET ADDRESS	1650 PRUDENTIAL DR SUITE 400	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	AS	☐ Delete
NAME	WHITLATCH SUSAN G	
STREET ADDRESS	1650 PRUDENTIAL DRIVE #400	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	SVPD	☐ Delete
NAME	MASON WILLIAM L	
STREET ADDRESS	1650 PRUDENTIAL DRIVE #400	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	PD	☐ Delete
NAME	FITCH DAVID D	
STREET ADDRESS	1650 PRUDENTIAL DRIVE #400	
CITY-ST-ZIP	JACKSONVILLE FL 32207	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	DVP	☒ Change ☐ Addition
NAME	REGAN MICHAEL N	
STREET ADDRESS	1650 PRUDENTIAL DR SUITE 400	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	D	☒ Change ☐ Addition
NAME	TWOMEY KEVIN M	
STREET ADDRESS	1650 PRUDENTIAL DRIVE SUITE 400	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	CFO	☒ Change ☐ Addition
NAME	SNYDER M BRUCE	
STREET ADDRESS	1650 PRUDENTIAL DRIVE SUITE 400	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	☒ Change ☐ Addition
NAME	HENDERSON ALISON K	
STREET ADDRESS	1650 PRUDENTIAL DRIVE #400	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	P	☒ Change ☐ Addition
NAME	HERRING, JR. FRANK W	
STREET ADDRESS	4901 VINELAND ROAD SUITE 200	
CITY-ST-ZIP	ORLANDO FL 32811	

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. WHITLATCH

AS

03/02/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)