

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000046354

1. Entity Name

CLAIMS MANAGEMENT SYSTEMS, INC.

**FILED**  
**May 12, 2000 8:00 am**  
**Secretary of State**

05-12-2000 90039 023 \*\*\*150.00

Principal Place of Business

Mailing Address

2601 CATTLEMEN ROAD  
SARASOTA FL 34232

2601 CATTLEMEN ROAD  
SARASOTA FL 34232-6214

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

65-0837876

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

JACOBS, G W  
2601 CATTLEMEN ROAD  
SARASOTA FL 34232

## 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.

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 ☐ Delete  
NAME D  
STREET ADDRESS CURRIN, RUSSELL  
CITY-ST-ZIP 2601 CATTLEMEN ROAD  
SARASOTA FL 34232

TITLE ☐ Delete  
NAME D  
STREET ADDRESS STAFFORD, JOHN  
CITY-ST-ZIP 2601 CATTLEMEN ROAD  
SARASOTA FL 34232

TITLE ☐ Delete  
NAME D  
STREET ADDRESS CONYERS, ALBERT  
CITY-ST-ZIP 2601 CATTLEMEN ROAD  
SARASOTA FL 34232

TITLE ☒ Delete  
NAME D  
STREET ADDRESS FLANDERS, ROBERT  
CITY-ST-ZIP 2601 CATTLEMEN ROAD  
SARASOTA FL 34232

TITLE ☐ Delete  
NAME D  
STREET ADDRESS FOXWORTHY, H. RONALD  
CITY-ST-ZIP 2601 CATTLEMEN ROAD  
SARASOTA FL 34232

TITLE ☒ Delete  
NAME D  
STREET ADDRESS GETZEN, WILLIAM  
CITY-ST-ZIP 2601 CATTLEMEN ROAD  
SARASOTA FL 34232

## 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition  
NAME CURRIN, RUSSELL A. JR.  
STREET ADDRESS  
CITY-ST-ZIP

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

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

TITLE ☐ Change ☒ Addition  
NAME V.T  
STREET ADDRESS WEBBER, DAVID  
CITY-ST-ZIP 2601 CATTLEMEN ROAD  
SARASOTA FL 34232

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

TITLE ☐ Change ☒ Addition  
NAME D.P  
STREET ADDRESS JACOBS, G.W.  
CITY-ST-ZIP 2601 CATTLEMEN ROAD  
SARASOTA FL 34232

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

Date

Daytime Phone #

4/27/00 (941) 951-3627

CR2E034 (9/99)