

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000070593

1. Entity Name

PROFESSIONAL PROPERTY SERVICES, INC.

**FILED**  
Feb 26, 2000 8:00 am  
**Secretary of State**

02-26-2000 90039 024 \*\*\*150.00

Principal Place of Business

Mailing Address

2642 GLENEAGLES DRIVE  
CLEARWATER FL 33761

2642 GLENEAGLES DRIVE  
CLEARWATER FL 33761-2751

2. Principal Place of Business

3. Mailing Address

3379 Hyde Park Dr.

3379 Hyde Park Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State  
Clearwater, FL

City & State  
Clearwater, FL

4. FEI Number 59-3527635

Applied For  
Not Applicable

Zip  
33761

Country  
Pinellas

Zip  
33761

Country  
Pinellas

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

GRINNELL, DAVID C  
2642 GLENEAGLES DRIVE  
CLEARWATER FL 33761

Name  
Grinnell, David C.

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

3379 Hyde Park Dr.

City  
Clearwater

FL

Zip Code  
33761

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 *WC Grinnell*

2/18/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME GRINNELL, DAVID C  
STREET ADDRESS 2642 GLENEAGLES DRIVE  
CITY-ST-ZIP CLEARWATER FL 33761

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS 3379 Hyde Park Dr.  
CITY-ST-ZIP Clearwater, FL 33761

TITLE D ☐ Delete  
NAME GENTZORN, JAMES  
STREET ADDRESS 1335 BELLEAIR ROAD  
CITY-ST-ZIP CLEARWATER FL 33756

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
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: *WC Grinnell*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/00

Date

727-789-1682

Daytime Phone #

CR2E034 (9/99)