

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000085506

1. Entity Name
TAMPA BAY, DAVENPORT INC.

FILED
May 04, 2001 8:00 am
Secretary of State

05-04-2001 90033 022 ***150.00

Principal Place of Business
10801 75TH STREET
LARGO FL 33777

Mailing Address
10801 75TH STREET
LARGO FL 33777

968679



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-3536847

Applied For
Not Applicable

Zip

Country

Zip

Country

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

KHIN, ALI H
1005 GULF BLVD., SUITE 401
INDIAN ROCKS BCH FL 33785

Name John L. Maloney, PA
Street Address (P.O. Box Number is Not Acceptable)
~~3862 Central Ave~~
~~St. Petersburg~~
City St. Petersburg FL Zip Code 33711

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 *John L. Maloney*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE 1/11/11

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P
NAME CURTIS, JEFFERY P
STREET ADDRESS 8694 OAKDALE RD
CITY-ST-ZIP LARGO FL 33777 ☒ Delete

TITLE President
NAME David W. Balcom
STREET ADDRESS 3990 43rd Avenue
CITY-ST-ZIP ST. Petersburg FL 33714 ☒ Change ☐ Addition

TITLE D
NAME KHIN, ALI
STREET ADDRESS 1005 GULF BOULEVARD, SUITE 401
CITY-ST-ZIP INDIAN ROCKS BEACH FL 33785

TITLE Secy/Treasurer
NAME Khin, Ali
STREET ADDRESS 1310 Gulf Blvd Ste 105
CITY-ST-ZIP Clearwater FL 33767 ☐ Change ☐ Addition

TITLE D
NAME BALCOM, DAVID W
STREET ADDRESS 3990 43RD AVE NORTH
CITY-ST-ZIP SAINT PETERSBURG FL 33714

TITLE Director
NAME Lori A. Curtis
STREET ADDRESS 8694 Oakdale Rd
CITY-ST-ZIP Largo FL 33777 ☐ Change ☒ Addition

TITLE ~~Curtis~~
NAME ~~Jeffery P. Curtis~~
STREET ADDRESS ~~8694 Oakdale Rd~~
CITY-ST-ZIP ~~Largo FL 33777~~ ☐ Delete

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

TITLE President
NAME David W. Balcom
STREET ADDRESS 3990 43rd Ave North
CITY-ST-ZIP St. Petersburg FL 33714 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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 #

CR2E034 (10/00)