

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90002 001 ***150.00

0682771

DOCUMENT # P98000089392

1. Entity Name

~~HILL, REIS, ADAMS, HALL & SCHIEFFELIN, P.A.~~

HILL, ADAMS, HALL & SCHIEFFELIN, P.A.

Principal Place of Business

1417 E. CONCORD ST.
ORLANDO FL 32803

Mailing Address

1417 E. CONCORD ST.
ORLANDO FL 32803

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 **59-3544884**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HALL, LARRY D
1417 E. CONCORD ST.
ORLANDO FL 32803

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

~~Varied 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 **DCTC** ☐ Delete
NAME **HILL, G. BRUCE**
STREET ADDRESS **5814 MASTERS BLVD.**
CITY-ST-ZIP **ORLANDO FL 32819**

TITLE **DAT** ☒ Delete
NAME **REIS, GREGORY**
STREET ADDRESS **812 W NEW HAMPSHIER ST**
CITY-ST-ZIP **ORLANDO FL 32804**

TITLE **1VD** ☒ Delete
NAME **ADAMS, JANET W**
STREET ADDRESS **P.O. BOX 191**
CITY-ST-ZIP **WINDERMERE FL 34786**

TITLE **PCD** ☐ Delete
NAME **HALL, LARRY D**
STREET ADDRESS **728 CRICKLEWOOD TERR.**
CITY-ST-ZIP **HEATHROW FL 32746**

TITLE **2VD** ☐ Delete
NAME **SCHIEFFELIN, THOMAS L JR.**
STREET ADDRESS **820 COVE PARK PLACE**
CITY-ST-ZIP **LONGWOOD FL 32779**

TITLE **ASD** ☒ Delete
NAME **LARGE, WILLIAM W**
STREET ADDRESS **940-B E. MICHIGAN STR.**
CITY-ST-ZIP **ORLANDO FL 32806**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **S, D** ☐ Change ☒ Addition
NAME **Bartolomei, Matthew P.**
STREET ADDRESS **1819 Hollywood Ave**
CITY-ST-ZIP **Winter Park, FL 32789**

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

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
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:

Larry D. Hall, PCD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-01
Date

407-896-0425
Daytime Phone #

CR2E034 (10/00)

HILL
ADAMS
HALL
&
SCHIEFFELIN
ATTORNEYS AT LAW

A Professional Association

PERM00089392

514300

Attachment
#9889392

1417 EAST CONCORD STREET
POST OFFICE BOX 533995
ORLANDO, FLORIDA 32853-3995

TELEPHONE (407) 896-0425
FAX (407) 896-9236
EMAIL: jbybee@hahslaw.com

JEANIE S. BYBEE, CLA
OFFICE ADMINISTRATOR

March 14, 2001

Department of State
Division of Corporations
P. O. Box 1500
Tallahassee, FL 32302-1500

Re: Uniform Business Reports
Hill, Adams, Hall & Schieffelin, P.A.
Y.A.C.

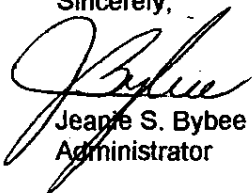
Gentlemen:

Enclosed please find the following:

1. Original UBR for Y.A.C., w/check #1250 in the amount of \$150.00
2. Original UBR for Hill, Adams, Hall & Schieffelin, P.A., w/check #020241 in the amount of \$150.00

If you need anything further in this regard, please let us know immediately.

Sincerely,



Jeanie S. Bybee
Administrator

cc: Bob Mead, Esq.

Enclosures