

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000089392

FILED  
Apr 25, 2002 8:00 AM  
Secretary of State

Entity Name: HILL, ADAMS, HALL & SCHIEFFELIN, P.A.

## Current Principal Place of Business:

1417 E. CONCORD ST.  
ORLANDO, FL 32803

## New Principal Place of Business:

1030 WEST CANTON AVENUE  
SUITE 201  
WINTER PARK, FL 32789

## Current Mailing Address:

1417 E. CONCORD ST.  
ORLANDO, FL 32803

## New Mailing Address:

P.O. BOX 1090  
WINTER PARK, FL 32792

FEI Number: 59-3544884

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

## Name and Address of New Registered Agent:

HALL, LARRY D  
1030 WEST CANTON AVENUE  
SUITE 201  
WINTER PARK, FL 32789

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: LARRY D. HALL

04/25/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: DCTC ( ) Delete  
Name: HILL, G. BRUCE  
Address: 5814 MASTERS BLVD.  
City-St-Zip: ORLANDO, FL 32819

Title: SD ( ) Delete  
Name: BARTOLOMEI, MATTHEW P  
Address: 1819 HOLLYWOOD AVE  
City-St-Zip: WINTER PARK, FL 32789

Title: 1VD ( ) Delete  
Name: ADAMS, JANET W  
Address: P.O. BOX 191  
City-St-Zip: WINDERMERE, FL 34786

Title: PCD ( ) Delete  
Name: HALL, LARRY D  
Address: 728 CRICKLEWOOD TERR.  
City-St-Zip: HEATHROW, FL 32746

Title: 2VD ( ) Delete  
Name: SCHIEFFELIN, THOMAS L JR.  
Address: 820 COVE PARK PLACE  
City-St-Zip: LONGWOOD, FL 32779

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LARRY D. HALL

PCD

04/25/2002

Electronic Signature of Signing Officer or Director

Date