

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000101611

1. Entity Name

SEARCH CONSULTANTS OF AMERICA, INC.

Principal Place of Business

9623 OAK RUN DRIVE  
BRADENTON FL 34202

Mailing Address

9623 OAK RUN DRIVE  
BRADENTON FL 34202-9409

2. Principal Place of Business

3651 42<sup>nd</sup> AVE S.

3. Mailing Address

3651 42<sup>nd</sup> AVE S.

Suite, Apt. #, etc.

Suite C-107

Suite, Apt. #, etc.

Suite C-107

City & State

St. Petersburg, FL.

City & State

St. Petersburg, FL.

Zip

33711

Country

United States

Zip

33711

Country

U.S.

4. FEI Number

58-2405287

Applied For

Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

WILLIS, DALE  
9623 OAK RUN DRIVE  
BRADENTON FL 34202

7. Name and Address of New Registered Agent

Name Joseph Fabrizio

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

3585 41<sup>st</sup> WAY S. #46E

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

*Joseph Fabrizio*

4-24-00

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

TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIS, DALE	
STREET ADDRESS	9623 OAK RUN DRIVE	
CITY-ST-ZIP	BRADENTON FL 34202	
TITLE	D	<input type="checkbox"/> Delete
NAME	FABRIZIO, JOSEPH	
STREET ADDRESS	3309 CALIBRE CREEK PKWY	
CITY-ST-ZIP	ROSWELL GA 30076	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILLIS, DALE	
STREET ADDRESS	4001 40 <sup>th</sup> ST S	
CITY-ST-ZIP	SAINT PETERSBURG, FL. 33711	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FABRIZIO, JOSEPH	
STREET ADDRESS	3585 41 <sup>st</sup> WAY S. #46E	
CITY-ST-ZIP	ST. PETERSBURG, FL. 33711	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Dale Willis*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-12-00

Date

727-864-9001

Daytime Phone #

FILED

May 11, 2000 8:00 am  
Secretary of State

05-11-2000 90341 001 \*\*\*\*75.00

05-11-2000 90341 002 \*\*\*\*75.00

13264



DO NOT WRITE IN THIS SPACE

CR2F034 19/001