

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000105840

1. Entity Name

FIRST COAST SOLUTIONS, INC.

FILED
Feb 07, 2000 8:00 am
Secretary of State

02-07-2000 90009 046 ***150.00

Principal Place of Business

Mailing Address

4215 SOUTHPOINT BLVD. SUITE 100
JACKSONVILLE FL 32216

4215 SOUTHPOINT BLVD. SUITE 100
JACKSONVILLE FL 32216-6191

2. Principal Place of Business

12852 BIGGIN CHURCH RD. S.

Suite, Apt. #, etc.

3. Mailing Address

12852 BIGGIN CHURCH RD. S.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Jacksonville, FL

City & State

Jacksonville, FL

4. FEI Number

59-3553227

Applied For

Not Applicable

Zip

32224

Country

USA

Zip

32224

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCHNEIDER, MICHAEL N
4215 SOUTHPOINT BLVD, SUITE 100
JACKSONVILLE FL 32216

7. Name and Address of New Registered Agent

Name

LAURI Brazier

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

12852 Biggin Church Rd. S.

City

Jacksonville

FL

Zip Code

32224

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

Lauri Brazier

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2-1-2000

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 ☐ Delete
NAME D BRAZIER, MARK
STREET ADDRESS 12852 BIGGIN CHURCH RD SOUTH
CITY-ST-ZIP JACKSONVILLE FL 32224

TITLE ☐ Delete
NAME D BRAZIER, LAURIE
STREET ADDRESS 12852 BIGGIN CHURCH RD SOUTH
CITY-ST-ZIP JACKSONVILLE FL 32224

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME V, S MARK Brazier
STREET ADDRESS 12852 Biggin Church Rd. South
CITY-ST-ZIP JACKSONVILLE, FL 32224

TITLE ☒ Change ☐ Addition
NAME P, T LAURI Brazier
STREET ADDRESS 12852 Biggin Church Rd. South
CITY-ST-ZIP JACKSONVILLE, FL 32224

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

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

TITLE ☐ Change ☐ Addition
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:

Lauri Brazier

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-2000

Date

Daytime Phone #