

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P990000013133

1. Entity Name

FIRST INDEX FUND ADVISORS, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90217 002 ***150.00

Principal Place of Business

Mailing Address

10630 NORTH 56TH STREET #200
TAMPA FL 33617

10630 NORTH 56TH STREET #200
TAMPA FL 33617-3612



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

601 S. Harbour Island Blvd 601 S. Harbour Island Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 200

Suite 200

City & State

City & State

Tampa, Florida

Tampa, Florida

4. FEI Number

☒ Applied For
☐ Not Applicable

Zip

Country

Zip

Country

33602

USA

33602

USA

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

HODGES, GEOFFREY T
400 NORTH TAMPA STREET
SUITE 2630
TAMPA FL 33602

Name
Geoffrey Todd Hodges, Esq.

Street Address (P.O. Box Number is Not Acceptable)
601 South Harbour Island Blvd.

Suite 200

City
Tampa

FL

Zip Code
33602

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

4/27/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MUSOLINO, FRANK
10630 NORTH 56TH STREET #200
TAMPA FL 33617 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Frank Musolino
601 S. Harbour Island Blvd, Ste 200
Tampa, Florida 33602 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
WANNAMAKER, WHITFIELD
2910 BAY TO BAY BOULEVARD #211
TAMPA FL 33629 ☒ Delete

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

TITLE
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STREET ADDRESS
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☐ 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

4/27/00

Date

813-262-2365

Daytime Phone #

CR2E034 (9/99)