

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

0027203 AV

DOCUMENT # P99000025163

1. Entity Name
PMT, INC.

03-27-2002 90021 045 ***150.00

Principal Place of Business Mailing Address
3100 UNIVERSITY BLVD S STE-122 3100 UNIVERSITY BLVD S STE-122
JACKSONVILLE FL 32216 JACKSONVILLE FL 32216



2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.
100

City & State City & State
JACK, FL.

Zip Country Zip Country
32256 USA

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3575487** Applied For
 Not Applicable

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

ROLFE, LAWRENCE C ESQ.
720 BLACKSTONE BUILDING
JACKSONVILLE FL 32202

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 _____ (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. ☐ **FILE NOW!!! FEE IS \$150.00**
After May 1, 2002 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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	P	ROLFE, LAWRENCE C	720 BLACKSTONE BUILDING JACKSONVILLE FL 32202				
	DT	ROWLAND, CHARLES L	8568 CROOKED TREE DR JACKSONVILLE FL 32256				

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: **CHARLES L. ROWLAND** 3/17/02 904 737-8309
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)