

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2000 8:00 am
Secretary of State

03-14-2000 90014 023 ***150.00

624778



DO NOT WRITE IN THIS SPACE

DOCUMENT # P99000026603

1. Entity Name
ADVANTAGE BANKSHARES, INC.

Principal Place of Business 777 S FLAGLER DRIVE, SUITE 900 WEST PALM BEACH FL 33401	Mailing Address 777 S FLAGLER DRIVE, SUITE 900 WEST PALM BEACH FL 33401-6161
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2. Principal Place of Business 741 US Highway One Suite, Apt. #, etc.	3. Mailing Address 741 US Highway One Suite, Apt. #, etc.
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City & State North Palm Beach, FL	City & State North Palm Beach, FL	4. FEI Number 65-0925265	Applied For Not Applicable
Zip 33408	Country Palm Beach	Zip 33408	Country Palm Beach

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
DAMRADT, RUSSELL T
 777 S FLAGLER DRIVE, SUITE 900
 WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent
 Name
R. Michael Caldwell
 Street Address (P.O. Box Number is Not Acceptable)
c/o Advantage Bankshares, Inc.
741 US Highway One
 City
North Palm Beach **FL** Zip Code
33408

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 **R. Michael Caldwell, Vice President** DATE **3/9/00**
(NOTE: Registered Agent signature required when reinstating)

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 NAME STREET ADDRESS CITY-ST-ZIP	PD TUCKER, ALAN 3440 S OCEAN BLVD, 502 S PALM BEACH FL 33480 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD JEFFER, HERMAN 19950 BEACH RD, APT GN JUPITER FL 33469 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CALDWELL, R. MICHAEL 13085 COASTAL CIR PALM BEACH GARDENS FL 33437 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FRIEDMAN, DAVID A 7876 DORCHESTER RD BOYNTON BEACH FL 33437 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Tucker, Allen 3440 S. Ocean Blvd., 502 S Palm Beach, FL 33480
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Jeffer, Herman 19950 Beach Rd., Apt. 8N Jupiter, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Caldwell, R. Michael 13085 Coastal Circle Palm Beach Gardens, FL 33410 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Beber, Robert H. 7228 Queenferry Circle Boca Raton, FL 33496 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 **R. Michael Caldwell** DATE **3/9/00** DAYTIME PHONE # **(561) 840-7751**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/99)