

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000048201

1. Entity Name

BREWER FOUSE & ASSOCIATES, P.A.

FILED
May 04, 2000 8:00 am
Secretary of State

05-04-2000 90152 045 ***150.00

Principal Place of Business

918 LITHIA-PINECREST ROAD
BRANDON FL 33511

Mailing Address

918 LITHIA-PINECREST ROAD
BRANDON FL 33509-0644

2. Principal Place of Business

3839 West Kennedy Blvd
Suite, Apt. #, etc.

3. Mailing Address

3839 West Kennedy Blvd
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Tampa FL

City & State

Tampa FL

4. FEI Number

59-3519729

Applied For

Not Applicable

Zip

33609

Country

U.S.

Zip

FL 33609

Country

U.S.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JONES, B E
918 LITHIA-PINECREST ROAD
BRANDON FL 33511

7. Name and Address of New Registered Agent

Name

Vickie S. Griggsby

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

3839 West Kennedy Blvd

City

Tampa

FL

Zip Code

33609

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 Vickie S. Griggsby

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-28-00

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

TITLE ☐ Delete
NAME D
STREET ADDRESS FOUSE, HELEN B
CITY-ST-ZIP 2204 LADYWOOD COURT
BRANDON FL 33511

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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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
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
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CITY-ST-ZIP

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TITLE ☐ Change ☐ Addition
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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:

Helen Brouwer Fouse

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/00

Date

(813) 350-0806

Daytime Phone #

CR2E034 (9/99)