

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 30, 2002 8:00 am**  
**Secretary of State**

04-30-2002 90080 003 \*\*\*150.00

**DOCUMENT # P99000056393**

1. Entity Name

HOWARD J. SMITH, P.A.

Principal Place of Business

Mailing Address

~~ONE SAN JOSE PLACE~~

~~ONE SAN JOSE PLACE~~

~~SUITE 31~~

~~SUITE 31~~

~~JACKSONVILLE FL 32257~~

~~JACKSONVILLE FL 32257~~

2. Principal Place of Business

3. Mailing Address

1930 San Marco Blvd.

1930 San Marco Blvd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 208

Suite 208

City & State

City & State

Jacksonville, FL

Jacksonville, FL

Zip

Zip

32207

Country

Country

USA

32207

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3580675

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

SMITH, HOWARD J

Name

~~ONE SAN JOSE PLACE~~

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

~~SUITE 31~~

1930 San Marco Blvd.

~~JACKSONVILLE FL 32257~~

Suite 208

City Jacksonville

FL

Zip Code

32207

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

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, 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 PD  
NAME SMITH, HOWARD J  
STREET ADDRESS ~~ONE SAN JOSE PLACE SUITE 31~~  
CITY-ST-ZIP JACKSONVILLE FL 32257

TITLE PD  
NAME ~~Howard Smith, Howard J.~~ ☒ Change ☐ Addition  
STREET ADDRESS 1930 San Marco Blvd., Suite 208  
CITY-ST-ZIP Jacksonville, FL 32207

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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: *Howard J. Smith, President*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/02 904-346-0140  
 Date Daytime Phone #

CR2E034 (9/01)