

# 2000 UNIFORM BUSINESS REPORT (UBR)

6/3

FILED

Aug 03, 2000 8:00 am  
Secretary of State

06-30-2000 90007 005 \*\*\*158.75

08-03-2000 90001 027 \*\*\*391.25

DOCUMENT # P99000064081

1. Entity Name

U.S. ADJUSTING AND ASSOCIATES, INC.

ADDRESS IS IN CORRECT - JUST RECEIVED BY MAIL &

Principal Place of Business

Mailing Address

my check for 15  
enclosed

1601 S.E. 8TH AVE. #392  
CRYSTAL RIVER FL 34429-4888

1601 S.E. 8TH AVE. #392  
CRYSTAL RIVER FL 34429-4888

3000 SANTEE PLACE  
JACKSONVILLE, FL 32259

2. Principal Place of Business

JACKSONVILLE

3. Mailing Address

3000 Santee Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

JACKSONVILLE, FL

4. FEI Number

31-1670210

Applied For

Not Applicable

Zip

Country

Zip

Country

32259

U.S.A.

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

BITNER, KEN

1601 S.E. 8TH AVE. #392

CRYSTAL RIVER FL 34429-4888

3000 Santee Pl.  
JACKSONVILLE, FL  
32259

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

Kenneth M Bitner

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, 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: PRESIDENT  
NAME: PATRICA BITNER  
STREET ADDRESS: 3000 Santee Place  
CITY-ST-ZIP: JACKSONVILLE, FL 32259

☐ Delete

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

TITLE: VICE-PRESIDENT  
NAME: KENNETH BITNER  
STREET ADDRESS: 3000 Santee Place  
CITY-ST-ZIP: JACKSONVILLE, FL 32259

☐ Delete

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

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
☐ Delete

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

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
☐ Delete

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

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
☐ Delete

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

TITLE:   
NAME:   
STREET ADDRESS:   
CITY-ST-ZIP:   
☐ 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:

Kenneth M Bitner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6-10-2000 904-280-2234

Date

Daytime Phone #

CR-25714 (9/97)