

**AMENDED**  
**2000 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P99000069653**

1. Entity Name **PROFESSIONAL INVESTORS, INC.**

**FILED**

**00 NOV 28 PM 1:45**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

Principal Place of Business Mailing Address **(SAME)**  
**4251 UNIVERSITY BLVD. S.  
SUITE 102  
JACKSONVILLE, FL 32216**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3591318**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional  
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MARCUS HANCHER  
2509 INDEPENDENCE DR  
JACKSONVILLE BEACH, FL 32250**

Name

**LARRY OLGUIN**

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

**3701 DANFORTH DRIVE #411**

City

**JACKSONVILLE**

FL

Zip Code

**32224**

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

**LARRY OLGUIN, PRESIDENT**

**9-29-00**

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 \$550.00**

**After SEPTEMBER 13, 2000 Min. will be \$750.00**

**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 **PRESIDENT** ☒ Delete  
NAME **MARCUS HANCHER**  
STREET ADDRESS **2509 INDEPENDENCE DR**  
CITY-ST-ZIP **JACKSONVILLE BEACH, FL 32250**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PRESIDENT** ☐ Change ☒ Addition  
NAME **LARRY OLGUIN**  
STREET ADDRESS **3701 DANFORTH DRIVE #411**  
CITY-ST-ZIP **JACKSONVILLE, FL 32224**

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

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

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

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

TITLE ☐ Change ☐ Addition  
NAME  
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:

**LARRY OLGUIN 9-29-00 904-349-5876**

CR2E034 (5/00)