

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000093806

1. Entity Name  
SELECT PROFESSIONAL PLACEMENT, INC.

**FILED**  
**May 14, 2001 8:00 am**  
**Secretary of State**

05-14-2001 90012 016 \*\*\*150.00

Principal Place of Business  
4134 GULF OF MEXICO DR.  
SUITE 205  
LONGBOAT KEY FL 34228

Mailing Address  
4134 GULF OF MEXICO DR.  
SUITE 205  
LONGBOAT KEY FL 34228



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4134 GULF OF MEXICO DRIVE

3. Mailing Address

4134 GULF OF MEXICO DRIVE

Suite, Apt. #, etc.

SUITE 212

Suite, Apt. #, etc.

SUITE 212

City & State

LONGBOAT KEY FLORIDA

City & State

LONGBOAT KEY FLORIDA

Zip

34228

Country

USA

Zip

34228

Country

USA

4. FEI Number 65-0958490

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

KELLY, DAVID  
6550 SUPERIOR AVE  
SARASOTA FL 34231

Name

KELLY, DAVID A.

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

4134 GULF OF MEXICO DRIVE

SUITE 212

City

LONGBOAT KEY

FL

Zip Code

34228

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, 2001 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 KELLY, DAVID A  
STREET ADDRESS 6550 SUPERIOR AVE  
CITY-ST-ZIP SARASOTA FL 34231 ☒ Delete

TITLE PD  
NAME KELLY, DAVID A  
STREET ADDRESS 4134 GULF OF MEXICO DRIVE, SUITE 212  
CITY-ST-ZIP LONGBOAT KEY FL 34228 ☒ 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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

KELLY, DAVID A

04/17/01

Date

941 387 8972

Daytime Phone #

CR2E034 (10/00)