

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90022 045 ***550.00

DOCUMENT # P99000105350

1. Entity Name

AMERICAN BROKERAGE CONSULTANTS, INC.

Principal Place of Business

**424 CENTRAL AVENUE
 SUITE 500
 ST. PETERSBURG FL 33701**

Mailing Address

**424 CENTRAL AVENUE
 SUITE 500
 ST. PETERSBURG FL 33701**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3614573

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

**MCPARTLAND, FRANK
 424 CENTRAL AVENUE
 SUITE 500
 ST. PETERSBURG FL 33701**

7. Name and Address of New Registered Agent

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

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 \$550.00
After September 12, 2001 Fee 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

T
 NAME AYOTTE, RICHARD
 STREET ADDRESS 424 CENTRAL AVE., 5TH FLOOR
 CITY-ST-ZIP SAINT PETERSBURG FL 33701 ☐ Delete

P
 NAME O'MARA, ROBERT
 STREET ADDRESS 424 CENTRAL AVE., 5TH FLOOR
 CITY-ST-ZIP SAINT PETERSBURG FL 33701 ☐ Delete

CD
 NAME MCPARTLAND, FRANK J.
 STREET ADDRESS 424 CENTRAL AVE., 5TH FLOOR
 CITY-ST-ZIP SAINT PETERSBURG FL 33701 ☐ Delete

☐ Delete

☐ Delete

☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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 REQUIRED
FRANK J. MCPARTLAND
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/2/01
 Date
727-894-7600
 Daytime Phone #

CR2E034 (5/01)