

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 02, 2001 8:00 am
Secretary of State
 02-02-2001 90028 001 ***900.00

DOCUMENT # P99000110247

1. Entity Name

LAMAR FLORIDA, INC.

Principal Place of Business

5551 CORPORATE BLVD.
 BATON ROUGE LA 70808

Mailing Address

5551 CORPORATE BLVD.
 BATON ROUGE LA 70808

24105



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5551 Corporate Blvd

3. Mailing Address

Suite, Apt. #, etc.
 Suite 2A
 P.O. Box 66338

City & State

Baton Rouge, LA

City & State

Baton Rouge LA

4. FEI Number 72-0640751

Applied For

Not Applicable

Zip

70808

Country

USA

Zip

70896

Country

USA

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

CT CORPORATION SYSTEM
 1200 S. PINE ISLAND RD.
 PLANTATION FL 33324

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 \$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	P	<input type="checkbox"/> Delete
NAME	REILLY, KEVIN JR.	
STREET ADDRESS	5551 CORPORATE BLVD	
CITY-ST-ZIP	BATON ROUGE LA 70808	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MARCHAND, GERALD H	
STREET ADDRESS	5551 CORPORATE BLVD	
CITY-ST-ZIP	BATON ROUGE LA 70808	
TITLE	S	<input type="checkbox"/> Delete
NAME	MCIWAIN, JAMES R	
STREET ADDRESS	5551 CORPORATE BLVD	
CITY-ST-ZIP	BATON ROUGE LA 70808	
TITLE	T	<input type="checkbox"/> Delete
NAME	ISTRE, KEITH A	
STREET ADDRESS	5551 CORPORATE BLVD	
CITY-ST-ZIP	BATON ROUGE LA 70808	
TITLE	D	<input type="checkbox"/> Delete
NAME	LAMAR, CHARLES III	
STREET ADDRESS	5551 CORPORATE BLVD	
CITY-ST-ZIP	BATON ROUGE LA 70808	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ROME, JACK JR.	
STREET ADDRESS	5551 CORPORATE BLVD	
CITY-ST-ZIP	BATON ROUGE LA 70808	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Vice-President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sean Reilly	
STREET ADDRESS	5551 Corporate Blvd	
CITY-ST-ZIP	Baton Rouge, LA 70808	

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

Date

Daytime Phone #

CR2E034 (10/00)