2002 UNIFORM BUSINESS REPORT (UBR) Feb 04, 2002 8:00 am

S18905 DOCUMENT # **Secretary of State** 1. Entity Name 02-04-2002 90038 047 ***150.00 THOMAS C. DEARING, P.A. Mailing Address Principal Place of Business 50 NORTH LAURA STREET 50 NORTH L'AURA STREET **SUITE 2800 SUITE 2800** JACKSONVILLE FL 32202 JACKSONVILLE FL 32202 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-3043562 Not Applicable \$8.75 Additional Zip Country Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name DEARING, THOMAS C. Street Address (P.O. Box Number is Not Acceptable) **50 NORTH LAURA STREET SUITE 2800** JACKSONVILLE FL 32202 Zip Code City FL 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After May 1, 2002 Fee will be \$550.00 Tax:filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. **DPST** ☐ Delete TITLE TITLE DEARING, THOMAS C. NAME NAME 50 N LAURA ST. S2800 STREET ADDRESS STREET ADDRESS CITY-ST-7IP JACKSONVILLE FL 32202 CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-2IP CITY-ST-ZIP ☐ Change ■ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE ☐ Change ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete

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 chapter of the property with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Thomas C. Dearing SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TITLE NAME

STREET ADDRESS

CITY-ST-7IP

1/14/02

(904) 354-8000

CR2E034 (9/01)

Daytime Phone #

attachment Dict S18905

814654

LEBOEUF, LAMB, GREENE & MACRAE

L.L.P.

A LIMITED LIABILITY PARTNERSHIP INCLUDING PROFESSIONAL CORPORATIONS

NEW YORK WASHINGTON, D.C. ALBANY BOSTON

BOSTON DENVER HARRISBURG HARTFORD

HOUSTON
JACKSONVILLE

LOS ANGELES NEWARK PITTSBURGH

SALT LAKE CITY SAN FRANCISCO 50 N. LAURA STREET SUITE 2800

JACKSONVILLE, FL 32202-3650

(904) 354-8000

FACSIMILE: (904) 353-1673

writer's direct dial: January 16, 2002 LONDON
(A LONDON BASED MULTINATIONAL PARTNERSHIP)

PARIS

BRUSSELS

JOHANNESBURG

моѕсом

RIYADH

(AFFILIATED OFFICE)

TASHKENT

BISHKEK

ALMATY

BEIJING

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Florida 32302-1500

Re:

Thomas C. Dearing, P.A.

Dear Sir or Madam:

Enclosed for filing with the Florida Department of State is the 2002 Uniform Business Report for the above-referenced corporation. Also enclosed is check number 1075 in the amount of \$150.00 representing the filing fee charge.

Please do not hesitate to contact us if you have any questions.

Very truly yours,

Steven E. Marshall

Paralegal

Enclosures JK189209