2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 09, 2001 08:00 AM
Secretary of State

DOCUMENT # S77498

1. Entity Name
SWANSON & SPERLING, P.A.

Principal Place of Business	Mailing Address
500 E UNIVERSITY AVE SUITE C GAINESVILLE FL 32601	500 E UNIVERSITY AVE SUITE C GAINESVILLE FL 32601

2. Principal Place of Business	3. Mailing Address
2830 N.W. 41 STREET	P.O. BOX 358000
Suite, Apt. #, etc.: SUITE M	Suite, Apt. #, etc.:
City & State: GAINESVILLE FL	City & State: GAINESVILLE FL
Zip: 32606 Country:	Zip: 32635 Country:

DO NOT WRITE IN THIS SPACE

4. FEI Number: 59-3087086 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SWANSON CYNTHIA S
500 E UNIVERSITY AVE
GAINESVILLE FL
32601 US

7. Name and Address of New Registered Agent

Name: SWANSON CYNTHIA S
Street Address (P.O. Box Number is Not Acceptable): 2830 N.W. 41 STREET
SUITE M
City: GAINESVILLE FL Zip Code: 32606

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 ______________________ 02/09/2001
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DT SPERLING SHARON T 500 E UNIVERSITY AVE STE C GAINESVILLE FL 32601	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT SPERLING SHARON T 2830 N.W. 41 STREET GAINESVILLE FL 32605	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP SWANSON CYNTHIA S 500 E UNIVERSITY AVE, SUITE C GAINESVILLE FL 32601	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP SWANSON CYNTHIA S 2830 N.W. 41 STREET GAINESVILLE FL 32606	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E034 (11/00)

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: Cynthia Stump Swanson P 02/09/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #