

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2001 8:00 am
Secretary of State

03-07-2001 90606 021 ***150.00

DOCUMENT # S89439

1. Entity Name

DAVID A. HALLMAN, P.A.

Principal Place of Business

**1632-99 EAGLES LANDING
TALLAHASSEE FL 32308**

Mailing Address

**1632-99 EAGLES LANDING
TALLAHASSEE FL 32308
US**

2. Principal Place of Business

3462 Paces Ferry Rd.
Suite, Apt. #, etc.

3. Mailing Address

3462 Paces Ferry Rd.
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Tallahassee

City & State

Tallahassee

4. FEI Number

59-3100463

Applied For

Not Applicable

Zip

32308

Country

Leon

Zip

32308

Country

Leon

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HALLMAN, DAVID
1632 - 99 EAGLES LANDING
TALLAHASSEE FL 32308**

7. Name and Address of New Registered Agent

Name

HALLMAN, DAVID

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

3462 Paces Ferry Rd.

City

Tallahassee

FL

Zip Code

32308

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

3-4-01

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

TITLE ☐ Delete
NAME **D HALLMAN, DAVID**
STREET ADDRESS **312 E. PARK AVENUE**
CITY-ST-ZIP **CHIEFLAND FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **D HALLMAN, DAVID**
STREET ADDRESS **3462 Paces Ferry Rd.**
CITY-ST-ZIP **Tallahassee FL 32308**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 an other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-4-01 322-7636

CR2E034 (10/00)