

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # V05933**

1. Entity Name

METROCORP CENTERS, INC.**FILED**
Jan 19, 2001 8:00 am
Secretary of State

01-19-2001 90090 043 ***150.00

0039743

Principal Place of Business

**7328-F W UNIVERSITY AVENUE
GAINESVILLE FL 32607**

Mailing Address

**7328-F W UNIVERSITY AVENUE
GAINESVILLE FL 32607****C0006207**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

240-D NW 76th Drive

Suite, Apt. #, etc.

3. Mailing Address

240-D NW 76th Drive

Suite, Apt. #, etc.

City & State

Gainesville, FL 32607

City & State

Gainesville, FL 32607

4. FEI Number

59-3102337

Applied For

Not Applicable

Zip

32607

Country

Alachua

Zip

32607

Country

Alachua5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**HODOR, HOWARD
7328-F W UNIVERSITY AVENUE
GAINESVILLE FL 32607**

7. Name and Address of New Registered Agent

Name
Hodor, HowardStreet Address (P.O. Box Number is Not Acceptable)
240-D NW 76th DriveCity
Gainesville**FL**Zip Code
32607

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 State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
HODOR, HOWARD
7328-F W UNIVERSITY AVENUE
GAINESVILLE FL 32607** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DVST
SHAW, JAMES W
13505 NW 88TH PLACE
ALACHUA FL 32615** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
Hodor, Howard
240-D NW 76th Drive
Gainesville, FL 32607** ☒ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ 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 life empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)