2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

V23585 DOCUMENT

1. Entity Name

GEORGE & TITUS, P.A.



FILED Apr 03, 2003 8:00 am Secretary of State

04-03-2003 90121 023 ***150.00

						600 W	EIR								
Principal Place of Business 100 S. ASHLEY DRIVE SUITE 1290 TAMPA FL 33602 US			Mailing Address P.O. BOX 3240 TAMPA FL 33601-3240 US												
2. Principal Place of Business			3. Mailing Address						i i i kal i i oʻrki						
Suite, Apt. #, etc.			Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES								
City & State			City & State				4. FEI Number 59-3			9-31135	113540			Applied For Not Applicable	
Zip Country			Zip Cour			ntry	5. Certificate of Status Desired			ed [S8.75 Additional Fee Required				
6. Name and Address of Current				ed Agent		.4.	# E4 .	7. N	lame and Addr	ess of Ne	w Regis	tered A	gent	•	٦.
		100				Name							_		7
GEORGE,	PETER E. TH ASHLEY	DDIVE				Street Address (P.O. Box Number is Not Acceptable)									$\frac{1}{2}$
SUITE 129		DUIAE													1
TAMPA FL 33602							City FL Zip Code						de	1	
	named entit tions of regist	y submits this statement fo ered agent.	r the purp	oose of changing its	register	ed office or	registere	ed age	ent, or both, in t	he State o	f Florida	. I am fa	amiliar with	, and accept	1
SIGNATURE .	Signature, typed	or printed name of registered agent	and title if app	olicable. (NOTE	: Registere	d Agent signat	ure required	when rei	instating)			DATE			
Afte	r May 1, 200	!! FEE IS \$150.00 03 Fee will be \$550.00 o Florida Department o	f State			•		•	9. Election Trust Fur	Campaigr nd Contrib		ing		00 May Be d to Fees	
10.		OFFICERS AND		/B¢	11.			ADI	DITIONS/CHAN	ICES TO) EEI CE	OC AND	DIRECTOR	C IN1 1.1	↲
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: