

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 11, 2002 8:00 am
Secretary of State

02-11-2002 90195 005 ***150.00

DOCUMENT # V29719

1. Entity Name

J. BENNETT GROCOCK, P.A.

Principal Place of Business

Mailing Address

**205 E. CENTRAL BLVD.
 SUITE 601
 ORLANDO FL 32801
 US**

**205 E. CENTRAL BLVD.
 SUITE 601
 ORLANDO FL 32801
 US**

2. Principal Place of Business

455 S. Orange Avenue

Suite, Apt. #, etc.
Suite 500

City & State

Orlando, Florida

Zip
32801

Country
US

3. Mailing Address

455 S. Orange Avenue

Suite, Apt. #, etc.
Suite 500

City & State

Orlando, Florida

Zip
32801

Country
US



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3119597**

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**GROCOCK, J. BENNETT
 205 E. CENTRAL BLVD.
 SUITE 601
 ORLANDO FL 32801**

7. Name and Address of New Registered Agent

Name **The Business Law Group**
 Street Address (P.O. Box Number is Not Acceptable)
455 S. Orange Avenue
Suite 500
 City **Orlando** **FL** Zip Code **32801**

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]

J. Bennett Grocock, Pres.

1/24/02

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, 2002 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 **D** ☐ Delete
 NAME **GROCOCK, J. BENNETT**
 STREET ADDRESS **205 E. CENTRAL BLVD., SUITE 601**
 CITY-ST-ZIP **ORLANDO FL 32801**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D/P/S/T** ☒ Change ☐ Addition
 NAME **Grocock, J. Bennett**
 STREET ADDRESS **455 S. Orange Avenue, Suite 500**
 CITY-ST-ZIP **Orlando, Florida 32801**

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

TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

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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:

[Signature]

J. Bennett Grocock, Pres.

1/24/02 407-422-0300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)