

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 04, 2001 8:00 am  
Secretary of State

05-04-2001 90075 034 \*\*\*150.00

DOCUMENT # V44231

1. Entity Name

30TH STREET R & D PARK, INC.

Principal Place of Business

C/O D E SCHWARTZ  
702 N. FRANKLIN STREET  
TAMPA FL 33602-4429  
US

Mailing Address

C/O D E SCHWARTZ  
PO BOX 111  
TAMPA FL 33601-0111  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 59-3133496

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCDEVITT, S M  
702 N FRANKLIN ST  
TAMPA FL 33602

Name

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

City

FL

Zip Code

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 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	DP	<input type="checkbox"/> Delete
NAME	KOSTORYZ, J A	
STREET ADDRESS	702 N FRANKLIN ST	
CITY-ST-ZIP	TAMPA FL 33602-4429	
TITLE	DT	<input type="checkbox"/> Delete
NAME	GILLETTE, G. L.	
STREET ADDRESS	702 N FRANKLIN ST	
CITY-ST-ZIP	TAMPA FL 33602-4429	
TITLE	D	<input type="checkbox"/> Delete
NAME	EUSTACE, R K	
STREET ADDRESS	702 N. FRANKLIN STREET	
CITY-ST-ZIP	TAMPA FL 33602-4429	
TITLE	S	<input type="checkbox"/> Delete
NAME	SCHWARTZ, D.E	
STREET ADDRESS	702 N FRANKLIN ST	
CITY-ST-ZIP	TAMPA FL 33602-4429	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
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STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

D. E. Schwartz

4-27-01

(813) 228-1808

Date

Daytime Phone #

CR2E034 (10/00)