



CLIENT OPENING SURVEY FORM

Male
MR./MRS./MISS

James
FIRST NAME

Scarborough
LAST NAME

4028068732
CONTACT NUMBER

408-425-1994
ALTERNATE NUMBER

COMPANY DATA BASE

jamesascarborough@yahoo.com
EMAIL ADDRESS

P A Home Town Law
COMPANY NAME

http://www.hometownlawfirm.com
WEBSITE URL

126 Nw 76Th Dr
Address

Gainesville
City

Florida
State

32607-6674
ZIP Code

Legal Services

SIC DESCRIPTION

6931
SIC CODE

Independent
ENTITY TYPE

Under \$500,000
COMPANY SALES

138,600.01
REVENUE (USD)

Florida
COUNTRY/REGION

YES
MEDICAL INSURANCE



US Hwy 1 S, Saint Augustine, FL 32086 ,Plantation Island
Dr S, Saint Augustine, FL 32080

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1782