

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

03-11-2002 90072 032 ***158.75

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **590873313** ✓

1. Entity Name

Orlando Aviation Country Club, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5551 Ridgewood Drive

3. Mailing Address

SAME

Suite, Apt. #, etc.
Suite 203

Suite, Apt. #, etc.

City & State
Naples, FL

City & State

Zip
34108

Country
U.S.A.

Zip

Country

4. FEI Number
590873313

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Peter L. Keeley

Street Address (P.O. Box Number is Not Acceptable)
5551 Ridgewood Drive, Suite 501

City Naples

FL Zip Code
34108

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) ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$81.25
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 NAME STREET ADDRESS CITY - ST - ZIP	P, S, T -Keith A. Sharpe 5551 Ridgewood Dr. Suite 203 Naples, FL 34108
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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 on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/22/02 941-566-2800

CR2E034B (12/01)

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

420319

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