

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

**FILED**  
**Apr 23, 2002 8:00 am**  
**Secretary of State**

04-23-2002 90322 016 \*\*\*150.00

**DOCUMENT # 696027**

1. Entity Name

AMELIA REALTY, INC.

**DO NOT WRITE IN THIS SPACE**

**635428**

2. Principal Place of Business

P.O. Box 3000

3. Mailing Address

P.O. Box 3000

Suite, Apt. #, etc.

Amelia Island Plantation

Suite, Apt. #, etc.

Amelia Island Plantation

DO NOT WRITE IN THIS SPACE

City & State

Fernandina Bch, FL

City & State

Fernandina Bch, FL

4. FEI Number

58-1473630

Applied For

Not Applicable

Zip

Country

32035-3000

US

Zip

Country

32035-3000

US

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

Commander, Charles E., III

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

~~2000 Independent Square~~ 200 Laura Street

City

Jacksonville

FL

Zip Code  
32202

**DO NOT WRITE  
IN THIS SPACE**

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 \$61.25

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

PD

Cooper, Richard L.  
2750 Terminal Tower  
Cleveland, OH

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

SD

Gudbranson, Robert N.  
2750 Terminal Tower  
Cleveland, OH

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

V

Bray, Norman  
Amelia Island Plantation  
Amelia Island, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

T

Healan, Jack B., Jr.  
Amelia Island Plantation  
Amelia Island, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

S

Commander, Charles E., III  
200 Laura Street  
Jacksonville, FL

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

**DO NOT WRITE  
IN THIS SPACE**

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.

AMELIA REALTY, INC. - Jack B. Healan, Jr.

SIGNATURE:

By:

Treasurer

4/10/02 (904) 277-5101

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)