

2002 UNIFORM BUSINESS REPORT (UBR)

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

03-11-2002 90019 048 ****61.25

0059223

DOCUMENT # N28006

1. Entity Name

COLONY SOUTH, INC.

Principal Place of Business

**125 COLONY SOUTH DR.
 TARPON SPRINGS FL 34689
 US**

Mailing Address

**125 COLONY SOUTH DR.
 TARPON SPRINGS FL 34689
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2908080

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**GUNTER, ROY E
 40844 US HWY 19 N
 TARPON SPRINGS FL 34689**

7. Name and Address of New Registered Agent

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

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S ORR, SHERRY 109 COLONY SOUTH DR TARPON SPRINGS FL 34689	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRASER, SUZANNE 124 COLONY SOUTH DR TARPON SPRINGS FL 34689	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SIEGFRIED, JEAN 104 COLONY SOUTH DR TARPON SPRINGS FL 34689	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CALVE, GERALD 112 COLONY SOUTH DR TARPON SPRINGS FL 34689	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ERFOURTH, SHARON 101 COLONY SOUTH DR TARPON SPRINGS FL 34689	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARGON, WENDY 116 COLONY SOUTH DR TARPON SPRINGS FL 34689	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/T CALVE, GERALD 112 COLONY SOUTH DR. TARPON SPRINGS, FL. 34689	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KARAPHILLIS, MICHAEL 123 COLONY SOUTH DR. TARPON SPRINGS, FL. 34689	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PATNE, JACKIE 121 COLONY SOUTH DR. TARPON SPRINGS, FL. 34689	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D D'AGOSTINO, ANNA 113 COLONY SOUTH DR. TARPON SPRINGS, FL. 34689	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAUER, DORIS 108 COLONY SOUTH DR. TARPON SPRINGS, FL. 34689	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MORTON, IAN 110 COLONY SOUTH DR. TARPON SPRINGS, FL. 34689	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE: *[Signature]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-24-02 (727)938-2229
 Date Daytime Phone #

CR2E037 (9/01)