

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 04, 2002 8:00 am**  
**Secretary of State**

0000887  
 AV

DOCUMENT # **P01000102086**

1. Entity Name  
**FIRST COAST REAL ESTATE SERVICES, INC.**

08-04-2002 90156 004 \*\*\*150.00

Principal Place of Business  
**563 CANAL RD.  
 PONTE VEDRA BEACH FL 32082**

Mailing Address  
**563 CANAL RD.  
 PONTE VEDRA BEACH FL 32082**



2. Principal Place of Business  
**5730 Bowden Road**  
 Suite, Apt. #, etc.  
**Suite 107**

3. Mailing Address  
**P.O. Box 3364**  
 Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State  
**Jacksonville, FL**

City & State  
**Ponte Vedra Beach, FL**

4. FEI Number  
**59-3756210** Applied For  
 Not Applicable

Zip  
**32216**

Country  
**USA**

Zip  
**32004-3364**

Country  
**USA**

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**SMITH, ANN K ESQ.  
 ONE INDEPENDENT DR., STE. 2200  
 JACKSONVILLE FL 32202**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 \$550.00**  
**After September 13, 2002 Fee will be \$750.00**  
**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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete <b>D GAY, LINDA 563 CANAL RD. PONTE VEDRA BEACH FL 32082</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>D GAY, LINDA E. P.O. Box 696 Ponte Vedra Beach, FL 32004-0696</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>D GAY III, Pleasant H. 357 Bellair Blvd Orange Park, FL 32073</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Linda Gay* **President** Date: **07/30/02** Daytime Phone #: **904 482-1376**

CR2E034 (4/02)

*Attachment PO1000102086*

First Coast Real Estate Services, Inc.

DBA: Exit Realty Network

P.O. Box 3364

Ponte Vedra Beach, Florida 32004-3364

Uniform Business Report  
Divisions of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

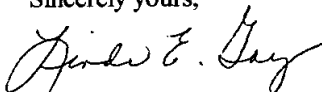
July 30, 2002

Gentlemen:

This is in reference to my conversation today with your agent, and to thank you for allowing us to correct the 2002 Uniform Business Report received by us this week from the post office. We are including the required check for \$150.00 in payment of the tax due thereon. We regret the confusion of the addresses and have corrected the report sent to us.

Thank you for your assistance in this matter.

Sincerely yours,



First Coast Real Estate Service Inc.

Linda E. Gay - President