9/3/2002-90163-008-$61.25-$61.25

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

"UBR 2(

FILED

02 SEP 18 AM 11:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

124793

DOCUMENT # P97000078092

1. Entity Name

Landmark Realty of Southwest Florida, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
5668 Strand Court	5668 Strand Court
Suite, Apt. #, etc.: #108	Suite, Apt. #, etc.: #108
City & State: Naples, Florida	City & State: Naples, Florida
Zip: 34110 Country: USA	Zip: 34110 Country: USA

DO NOT WRITE IN THIS SPACE

4. FEI Number: 593471577 ☐ Applied For ☐ Not Applicable

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

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: CLASP INC.

Street Address (P.O. Box Number is Not Acceptable): 3001 TAMIAMI TRAIL N., 4TH FLOOR

City: NAPLES FL Zip Code: 34103

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 _____ 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) ☐

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	DP
NAME	SHAFRAN, ARTHUR A.
STREET ADDRESS	5668 STRAND COURT, #108
CITY-ST-ZIP	NAPLES, FL 34110
TITLE	DVST
NAME	DIAMOND, MICHAEL
STREET ADDRESS	5668 STRAND COURT, #108
CITY-ST-ZIP	NAPLES, FL 34110
TITLE	D
NAME	PIERCE, JAMES E.
STREET ADDRESS	5668 STRAND COURT, #108
CITY-ST-ZIP	NAPLES, FL 34110
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E034B (12/01)

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.

Arthur A. Shafran, President

SIGNATURE: _____ 8-28-02 239-597-8400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

ys shafran