

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90092 036 ***150.00

DOCUMENT # G33108

1. Entity Name

FLORIDA PROPERTIES OF THE PALM BEACHES, INC.

Principal Place of Business

**4500 PGA BLVD STE 400
 SUITE 303A
 PALM BCH. GAR. FL 33418**

Mailing Address

**4500 PGA BLVD STE 400
 PALM BCH. GAR. FL 33418**

2. Principal Place of Business

4500 PGA Blvd.

3. Mailing Address

4500 PGA Blvd.

Suite, Apt. #, etc.

Suite 207

Suite, Apt. #, etc.

Suite 207

City & State

Palm BEach Gardens, FL

City & State

Palm Beach Gardens, FL

4. FEI Number

59-2295346

Applied For

Not Applicable

Zip

Country

33418

USA

Zip

Country

33418

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DIVOSTA, GUY M
 4500 PGA BLVD
 SUITE 303A
 PALM BCH. GAR. FL 33418**

Name **Jack B. Owen, Jr.**

Street Address (P.O. Box Number is Not Acceptable)
4500 PGA Blvd., Suite 207

City

Palm Beach Gardens,

FL

Zip Code
33418

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

Jack B. Owen, Jr., Pres.

Jack B. Owen, Jr., President

4/26/01

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) ☐

**FILE NOW!!! FEE IS \$150.00
 After MAY 1, 2001 Fee will be \$550.00
 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 **V** ☐ Delete
 NAME **KAIRALLA, ROBERT S.**
 STREET ADDRESS **4500 PGA BLVD SUITE 303A**
 CITY-ST-ZIP **PALM BCH. GAR. FL 33418**

TITLE **PD** ☐ Delete
 NAME **DIVOSTA, GUY M**
 STREET ADDRESS **4500 PGA BLVD SUITE 303A**
 CITY-ST-ZIP **WEST PALM BEACH FL 33418**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **V** ☒ Change ☐ Addition
 NAME **Kairalla, Robert S.**
 STREET ADDRESS **4500 PGA Blvd., Suite 207**
 CITY-ST-ZIP **Palm Beach Gardens, FL 33418**

TITLE **RD V** ☒ Change ☐ Addition
 NAME **~~Divosta, Guy M.~~ Divosta, Guy M.**
 STREET ADDRESS **4500 PGA Blvd., Suite 207**
 CITY-ST-ZIP **Palm Beach Gardens, FL 33418**

TITLE **PS TD** ☐ Change ☒ Addition
 NAME **Owen, Jack B., Jr.**
 STREET ADDRESS **4500 PGA Blvd., Suite 207**
 CITY-ST-ZIP **Palm Beach Gardens, FL 33418**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Jack B. Owen, Jr., as Pres./Director

Signature and typed or printed name of signing officer or director
Jack B. Owen, Jr. as Pres./Director

4/26/01

Date

561/627-2114

Daytime Phone #

CR2E034 (10/00)