FILED

## **2001 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 03, 2001 8:00 am Secretary of State **DOCUMENT # 310688** NORTHGATE DEVELOPMENT COMPANY INC 04-03-2001 90024 041 \*\*\*150.00 Principal Place of Business Mailing Address 135 PERRY AVE. S.E. 135 PERRY AVE. S.E. FORT WALTON BEACH FL 32548 FORT WALTON BEACH FL 32548 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-1156672 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCGEE JOHN C. Street Address (P.O. Box Number is Not Acceptable) 259 YACHT CLUB DRIVE FT. WALTON BEACH FL 32548 Zip Code City 8. The above named entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATUR! (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 12. CR2E034 (10/00) TITLE Delete TITLE ☐ Change MCGEE, JOHN C. NAME NAME STREET ADDRESS STREET ADDRESS 259 YACHT CLUB DRIVE CITY-ST-ZIP CITY-ST-ZIP FT. WALTON BEACH FL 32548 X Addition X Delete ☐ Change TITLE TITLE G. L. Prince, Jr. 636 W. Sunset Blvd. CLARY, R J NAME STREET ADDRESS JOES BAYOUR STREET ADDRESS Fort Walton Beach, FL 32547 CITY-ST-7IP CITY-ST-ZIP DESTIN FL Change Addition TITLE Delete . TITLE WALKER, WINSTON NAME NAME STREET ADORESS 255 YACHT CLUB DR STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP FORT WALTON BEACH FL 32548 ☐ Change ☐ Addition ☐ Delete TITLE TITLE ROBERTS, R P NAME NAME STREET ADDRESS **188 GRANDVIEW** STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP VALPARAISO FL ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME MINGER, J.W. NAME STREET ADDRESS STREET ADDRESS 13 KRISTIAN CR. CITY-ST-ZIP CITY-ST-ZIP NICEVILLE FL TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. Thereby 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.