

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90118 044 ***150.00

DOCUMENT # **359831**

1. Entity Name

HUGH GRANT REALTY AND BUILDERS INC



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1535 SATSUMA ST

Suite, Apt. #, etc.

3. Mailing Address

SAME

Suite, Apt. #, etc.

City & State

CLARWATER FLA

City & State

SAME

Zip

33756

Country

USA

Zip

SAME

Country

4. FEI Number

59-1311-369

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

HUGH V. GRANT

Street Address (P.O. Box Number is Not Applicable)

1535 SATSUMA ST

City

CLARWATER

FL

Zip Code

33756

**DO NOT WRITE
IN THIS SPACE**

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

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-7-2003

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

**\$5.00 May Be
Added to Fees**

10.

OFFICERS AND DIRECTORS

PRESIDENT / OWNER
HUGH V. GRANT
1535 SATSUMA ST
CLARWATER, FL 33756

TITLE
NAME
STREET ADDRESS
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IN THIS SPACE**

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 607, Florida Statutes; and that my name appears in Block 10 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

4-7-2003

Date

Daytime Phone #

CR2E034B (12/02)