

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

DOCUMENT # 423852

1. Entity Name

The Culbosa Land Co., Inc.



03 MAR 31 PM 12:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

4702 Oak Run Dr.

Suite, Apt. #, etc.

3. Mailing Address

4702 Oak Run Dr.

Suite, Apt. #, etc.

City & State

Sarasota, FL

City & State

Sarasota, FL

Zip

34243

Country

Manatee

Zip

34243

Country

Manatee

4. FEI Number

59-1463202

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name Braun, Robert

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

4702 Oak Run Dr.

City Sarasota

FL

Zip Code 34243

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

TITLE Pres.
NAME BRAUN Robert
STREET ADDRESS 4702 OAK RUN DR.
CITY-ST-ZIP SARASOTA FLA 34243

TITLE Sec.
NAME ESTHER BRAUN
STREET ADDRESS 4702 OAK RUN DR.
CITY-ST-ZIP SARASOTA, FL 34243

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
There HAS BEEN NO
CHANGE

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CITY-ST-ZIP

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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:

Robert Braun

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-4-03

Date

941-351-1911

Daytime Phone #

CR2E034B (12/02)