

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90275 041 ***150.00

0443390 AV

DOCUMENT # 493737

1. Entity Name

CLEMENT REALTY CORPORATION

Principal Place of Business

**1101 COUNTRY CLUB RD N
 ST PETERSBURG FL 33710-706
 US**

Mailing Address

**1101 COUNTRY CLUB RD N
 ST PETERSBURG FL 33710-706
 US**

80074059



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

05-9172546

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CLEMENT, JEAN L.

230 65TH ST NORTH

ST PETERSBURG FL 33710-7706

Name

Jean L. Clement

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

1101 Country Club Rd N.

St Petersburg

City

FL

Zip Code

33710

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

Jean L. Clement

(NOTE: Registered Agent signature required when reinstating)

April 10, 2002

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CLEMENT, JEAN L. 1101 COUNTRY CLUB RD N ST PETERSBURG FL 33710	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CLEMENT, JEAN L. 1101 COUNTRY CLUB RD N SAINT PETERSBURG FL 33710	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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

Jean L. Clement **Jean L. Clement**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PRES/Director

Date

4-10-02

Daytime Phone #

727-381-1415

CR2E034 (9/01)