

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 562838

1. Entity Name

J. DORSEY REAL ESTATE & APPRAISAL, INC.

Principal Place of Business

2700 E. OAKLAND PARK BLVD.
SUITE B
FT. LAUDERDALE FL 33306

Mailing Address

2700 E. OAKLAND PARK BLVD.
SUITE B
FT. LAUDERDALE FL 33306

2. Principal Place of Business

2655 E. OAKLAND PK BLVD

3. Mailing Address

2655 E. OAKLAND PK BLVD

Suite, Apt. #, etc.

Suite 2

Suite, Apt. #, etc.

Suite 2

City & State
FT LAUDERDALE FL

City & State
FT. LAUDERDALE FL

Zip
33306

Country
BRUNAND

Zip
33306

Country
BRUNAND

4. FEI Number
59-1822172

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRINKLEY, W. MICHAEL
200 EAST LAS OLAS BLVD.
SUITE 1800
FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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, 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

TITLE PD
NAME DORSEY, JOHN M.
STREET ADDRESS 2700 E. OAKLAND PARK BLVD
CITY-ST-ZIP FT. LAUDERDALE, FL 33306 ☐ Delete

TITLE VP
NAME DORSEY, MARY E
STREET ADDRESS 2700 EAST OAKLAND PARK BLVD
CITY-ST-ZIP FORT LAUDERDALE FL 33306 ☐ 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/7/02 (954) 566-3575
Date Daytime Phone #

FILED
Jan 15, 2002 8:00 am
Secretary of State

01-15-2002 90042 030 ***150.00



DO NOT WRITE IN THIS SPACE

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