2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachmer

SIGNATURE:

FILED DOCUMENT # 568637 Mar 03, 2000 8:00 am 1. Entity Name GULF SHORE DEVELOPMENT AND CONSTRUCTION, INC. **Secretary of State** 03-03-2000 90225 010 ***150.00 Mailing Address Principal Place of Business 6000 FOREST BLVD. 6000 FOREST BLVD. FORT MYERS FL 33908-4318 FORT MYERS FL 33908 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt, #, etc. Applied For 4. FEI Number City & State _City & State 59-1811657 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SWOR, DAVID Street Address (P.O. Box Number is Not Acceptable) 6000 FOREST BLVD 6385 PRESIDENTIAL, SW -SUITE 104 FORT MYERS FL 33919 Zip Code 33908 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. DPT Change ☐ Addition Delete TITLE TITLE SWOR, DAVID NAME NAME 6000 FOREST BLVD 6385 PRESIDENTIAL, SW STREET ADDRESS STREET ADDRESS FTIMYERS FL 33908 CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL Change ■ Addition ☐ Delete TITLE SWOR, DORIS NAME 6000 FOREST BLUD STREET ADDRESS 6385 PRESIDENTIAL, SW STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP FORT MYERS FL Change ☐ Addition Defete TITLE ROBYNS, PERI NAME NAME 6000 FOREST BLVD STREET ADDRESS 6385 PRESIDENTIAL, SW STREET ADDRESS FORT MYERS, FL 3390Y CITY-ST-ZIF CITY-ST-ZIF FT MYERS FL Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE Delete TITLE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS. CITY-ST-ZIP 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 of trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

URE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

Date

ner like empowered.