

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 590700

1. Entity Name

GLOBAL PROPERTIES REALTY, INC.

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90314 029 \*\*\*150.00

Principal Place of Business

Mailing Address

CREST BLDG #112  
 3601 SWANN AVENUE  
 TAMPA FL 33609

CREST BLDG #112  
 3601 SWANN AVENUE  
 TAMPA FL 33609-4547

2. Principal Place of Business

5102 W. Platt ST.

3. Mailing Address

P.O. Box 10296

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Tampa, Florida

City & State

Tampa, Florida

4. FEI Number

59-2028110

Applied For

Not Applicable

Zip

33609

Country

Hillsborough

Zip

33679-0296

Country

Hillsb.

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

BUNN, STANLEY R.  
 3601 SWANN AVENUE  
 SUITE 112  
 TAMPA FL 33609

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, 2000 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 PD ☐ Delete  
 NAME BUNN, STANLEY R.  
 STREET ADDRESS 5102 W. PLATT ST.  
 CITY-ST-ZIP TAMPA FL

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

TITLE D ☐ Delete  
 NAME BUNN, CORBY L.  
 STREET ADDRESS 10610 FAIRFIELD VILL DR  
 CITY-ST-ZIP TAMPA FL

TITLE ☒ Change ☐ Addition  
 NAME Bunn, Teresa A.  
 STREET ADDRESS 4800 South Westshore Blvd. Apt#1011  
 CITY-ST-ZIP Tampa, Florida 33611

TITLE D ☐ Delete  
 NAME BUNN, KAREN W.  
 STREET ADDRESS 10610 FAIRFIELD VILL DR  
 CITY-ST-ZIP TAMPA FL

TITLE ☒ Change ☐ Addition  
 NAME Bunn, Stanley R. (11)  
 STREET ADDRESS 11901 Keating Dr.  
 CITY-ST-ZIP Tampa, Fla 33626

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
 NAME  
 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 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 to an address, with an officer or trustee empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)