

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

DOCUMENT # 611708

1. Entity Name

Old Pioneer Properties, Inc.
Fort Walton Beach, FL 32547

FILED

02 APR -5 AM 10:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

630 Eglin Parkway

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Fort Walton Beach, FL

City & State

4. FEI Number

32-0007156

Applied For

Not Applicable

Zip
32547

Country
Okaloosa

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name
William E. Troxell

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

City
Fort Walton Beach

FL

Zip Code
32547

**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.

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) ☐

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY-ST-ZIP
William E. Troxell DS
237 LaFitte Crescent
Fort Walton Beach, FL 32547

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

400005388904--0
-04/30/02--01012--008
****150.00 ****150.00

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Frank B. Higdon DT
234 LaFitte Crescent
Fort Walton Beach, FL 32547

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
James B. Boswell DVP
234 LaFitte Crescent
Fort Walton Beach, FL 32547

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
Horace H. Higdon DP
234 LaFitte Crescent
Fort Walton Beach, FL 32547

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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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 on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

PRES. 3-25-02

CR2E034B (12/01)