

# 2002 UNIFORM BUSINESS REPORT (UBR)

APPROVED  
AND  
FILED

0014624  
AT

DOCUMENT # A96000001452

1. Entity Name  
MEL-RE DEVELOPMENT, LTD.

02 APR 15 AM 11:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business  
15051 S. TAMiami TRAIL, SUITE 203  
FT. MYERS FL 33908

Mailing Address  
15051 S. TAMiami TRAIL, SUITE 203  
FT. MYERS FL 33908



2. Principal Place of Business  
Suite, Apt. #, etc.

3. Mailing Address  
Suite, Apt. #, etc.

DUE BY MAY 1, 2002

City & State  
City & State

4. FEI Number 65-0653713  
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

COSTELLO, TRUMAN J  
12670 NEW BRITTANY BLVD., SUITE 101  
FORT MYERS FL 33907

## 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

DATE

9. Capital Contributions as Shown on record. \$1,050,000.00  
10. Amount of Capital Contributions in FLORIDA to date.  
11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

## 12. GENERAL PARTNER INFORMATION

DOCUMENT # P96000020293  
NAME MEL-RE DEVELOPMENT, INC.  
STREET ADDRESS 15051 S. TAMiami TRAIL, SUITE 203  
CITY-ST-ZIP FT. MYERS FL 33908

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STREET ADDRESS  
CITY-ST-ZIP

## 13. ADDRESS CHANGES ONLY

STREET ADDRESS  
CITY-ST-ZIP  
1000005294431--0  
-04/19/02--01004--026  
\*\*\*\*526.25 \*\*\*\*526.25

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STREET ADDRESS  
CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: President Mel-Re Development Inc  
General Partner 411-02 239-406-7737

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER Date Daytime Phone #

CR2E003 (9/01)