## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** Jan 25, 2000 8:00 am Secretary of State DOCUMENT # F33542 1. Entity Name TEPFE TOWN OF ST. AUGUSTINE, INC. 01-25-2000 90086 010 \*\*\*150.00 Principal Place of Business Mailing Address 12 GASTILLO DRIVE 12 CASTILLO DRIVE C/O-FREDERICK HARRIS FRED J. HARRS C/O-FREDERICK HARRIS - FRED J. HARRIS 905741 ST AUGUSTINE FL 32084 ST AUGUSTINE FL 32084 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2095506 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required. . . 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ARRIS FRED Street Address (P.O. Box Number is Not Acceptable) HARRIS, FREDERICK 12 CASTILLO DRIVE ST AUGUSTINE FL 32084 City ST ANGUSTINE 8. The above named entity shomits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. gent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 D TITLE Change ☐ Addition Delete TITLE HARRIS, JULIETTE B NAME NAME STREET ADDRESS 12 CASTILLO DRIVE STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ST AUGUSTINE, FL 00000 PRESIDENT + TREASURER Change HARRIS, FRED J Addition Delete TITLE TITLE HARRIS, FRED JX NAME NAME 12 castillo DR STAUSUSTOME, FL 32084 STREET ADDRESS STREET ADDRESS 12 CASTILLO DRIVE CITY-ST-ZIP CITY-ST-7IP ST AUGUSTINE FL ☐ Addition TITLE TITLE HARRIS, FREDERICK NAME NAME STREET ADDRESS STREET ADDRESS 12 CASTILLO DRIVE CITY-ST-ZIP CITY-ST-ZIP ST AUGUSTINE FL DICE PRESIDENT Change TITLE Delete TITLE DAMUS, JEFF 12 CASTILLO DRIVE NAME NAME STREET ADDRESS STREET ADDRESS ST AUGUSTINE, FZ 32084 CITY-ST-ZIP CITY-ST-ZIP SECRETARY TITLE ☐ Delete HARRIS, NAME NAME 12 charillo ORIVE. ST AUGUSTINE, FL3 2084 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 employered 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 wift all other like empowered. of the corporation or the receiver or tre changed, or on an attachment with

SIGNATURE: