

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 18, 2000 8:00 am
Secretary of State

01-18-2000 90149 012 ***150.00

DOCUMENT # F43958

1. Entity Name

RBF PROPERTIES, INC.

Principal Place of Business

Mailing Address

~~502 N.W. 75TH ST. STE. #228 GAINESVILLE FL 32607-1793~~
7257 N.W. 4TH BLVD. #268 GAINESVILLE, FL 32607

~~502 N.W. 75TH ST. STE. #228 GAINESVILLE FL 32607-1078~~
7257 N.W. 4TH BLVD. #268 GAINESVILLE, FL 32607

2. Principal Place of Business

3. Mailing Address

7257 N.W. 4TH BLVD.

7257 N.W. 4TH BLVD.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#268

#268

City & State

City & State

GAINESVILLE, FL

GAINESVILLE, FL

4. FEI Number

59-2120496

Applied For

Not Applicable

Zip

Country

Zip

Country

32607

ALACHUA

32607

ALACHUA

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

FREEMAN, RICHARD
502 NW 75TH ST
SUITE 228
GAINESVILLE FL 32607

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 **\$5.00** May Be Added to Fees: Trust Fund Contribution

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	P			
	FREEMAN, RICHARD	502 NW 75TH ST, SUITE 228	GAINESVILLE FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	PRES.			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	FREEMAN, RICHARD	7257 N.W. 4TH BLVD. #268	GAINESVILLE, FL 32607	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 with an address, with all other like empowered.

SIGNATURE:

Richard Freeman 1/12/00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD FREEMAN

352-271-5909

Date Daytime Phone #

CR2E034 (9/99)