

2002 UNIFORM BUSINESS REPORT (UBR)

1/2

FILED
Mar 10, 2002 8:00 am
Secretary of State

01-29-2002 90016 020 ***150.00

DOCUMENT # F43958

1. Entity Name
RBF-PROPERTIES, INC.

Principal Place of Business
7257 NW 4TH BLVD
268
GAINESVILLE FL 32607-1799

Mailing Address
7257 NW 4TH BLVD
268
GAINESVILLE FL 32607-1799

2. Principal Place of Business
5745 S. W. 75TH ST APT

Suite, Apt. #, etc.
#345

City & State
GAINESVILLE, FL

Zip
32608

Country
USA

3. Mailing Address
5745 S. W. 75TH STREET

Suite, Apt. #, etc.
#345

City & State
GAINESVILLE, FL

Zip
32608

Country
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2120496

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name **RICHARD FREEMAN**
Street Address (P.O. Box Number is Not Acceptable)
5745 S. W. 75TH STREET - #345
City **GAINESVILLE, FL** Zip Code **32608**

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, 2002 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FREEMAN, RICHARD 7257 NW 4TH BLVD # 268 GAINESVILLE FL 32607	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

SIGNATURE REQUIRED
RICHARD FREEMAN

2/15/2002 352 271 909

Date

Daytime Phone #

CR2E034 (9/01)