

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 03, 2003 8:00 am
Secretary of State

04-03-2003 90150 022 ***150.00

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DOCUMENT # F45433

1. Entity Name
ANCIENT CITY REALTY, INC.



Principal Place of Business
**5623 US HIGHWAY 19
STE 217A
NEW PORT RICHEY FL 34652
US**

Mailing Address
**P. O. BOX 58041
ST. PETERSBURG FL 33715
US**



2. Principal Place of Business
**1101 Pinellas Bay Way
Suite, Apt. #, etc.
403**

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

City & State
Tierra Verde, FLA.
Zip
33715 Country
Pinellas

City & State
Zip Country

4. FEI Number
59-2149535

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**CLARK, RAYMOND C
4110 S. FLA AVE., STE B-1
LAKELAND FL 33813**

7. Name and Address of New Registered Agent

Name
Raymond C. Clark
Street Address (P.O. Box Number is Not Acceptable)
**1101 Pinellas Bay Way
#403**
City
Tierra Verde FL Zip Code
33715

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Raymond C. Clark** DATE **4/5/03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
CLARK, RAYMOND C
4110 S. FLA AVE., STE B-1
LAKELAND FL 33813** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**President
Raymond C. Clark
1101 Pinellas Bay Way #403
Tierra Verde, FLA. 33715** ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Raymond C. Clark, President** DATE **4/5/03** TELEPHONE **727-8651022**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)