

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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

02-03-2003 90091 020 ***158.75

DOCUMENT # F94776

1. Entity Name
LAPPIN COMMUNICATIONS - FLORIDA, INC.



Principal Place of Business
**231 BRADLEY PLACE
SUITE 201
PALM BEACH FL 33480**

Mailing Address
**231 BRADLEY PLACE
SUITE 201
PALM BEACH FL 33480**



2. Principal Place of Business
500 Australian Ave South

Suite, Apt. #, etc.
Suite 100

City & State
West Palm Beach FL

Zip
33401

Country
U.S.

3. Mailing Address
500 Australian Ave South

Suite, Apt. #, etc.
Suite 100

City & State
West Palm Beach FL

Zip
33401

Country
USA

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **13-3129090**

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**FITZGERALD JAMES F.
231 BRADLEY PL.
SUITE 201
PALM BEACH FL 33480**

7. Name and Address of New Registered Agent

Name **FITZGERALD James F.**
Street Address (P.O. Box Number is Not Acceptable)
**500 Australian Ave South
Suite 100**
City **West Palm Beach** FL Zip Code **33401**

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 *James F. Fitzgerald*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/21/03

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

TITLE **VS** ☐ Delete
NAME **FITZGERALD, JAMES F**
STREET ADDRESS **231 BRADLEY PL. STE. 201**
CITY-ST-ZIP **PALM BCH. FL**

TITLE **P** ☐ Delete
NAME **LAPPIN, W R**
STREET ADDRESS **231 BRADLEY PL SUITE 201**
CITY-ST-ZIP **PALM BEACH FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **VS** ☒ Change ☐ Addition
NAME **FITZGERALD James F**
STREET ADDRESS **500 Australian Ave South Suite 100**
CITY-ST-ZIP **West Palm Beach FL 33401**

TITLE **P** ☒ Change ☐ Addition
NAME **LAPPIN, W R**
STREET ADDRESS **500 Australian Ave South Suite 100**
CITY-ST-ZIP **West Palm Beach FL 33401**

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

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

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

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:

James F. Fitzgerald
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/21/03 **561-655-3469**
Date Daytime Phone #

CR2E034 (10/02)