

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 10, 2001 8:00 am
Secretary of State

05-10-2001 90164 030 ***150.00

DOCUMENT # F99000000572

1. Entity Name

CALOOSA PROPERTIES, INC.

Principal Place of Business

Mailing Address

**3225-32ND STREET, S.E.
GRAND RAPIDS MI 49512**

**3225-32ND STREET, S.E.
GRAND RAPIDS MI 49512**

2. Principal Place of Business

73501 OVERSEAS HIGHWAY

3. Mailing Address

**3145 SHAFER
~~73501 OVERSEA ROAD S.E.~~**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ISLAMORADA, FLORIDA

City & State

KENTWOOD, MICHIGAN

Zip

33036

Country

USA

Zip

49512

Country

USA

4. FEI Number

38-3429655

Applied For

Not Applicable

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

**TASSELL, LESLIE E
73801 OVERSEAS HWY
ISLAMORADA FL 33036**

Name

TASSELL, LESLIE E.

Street Address (P.O. Box Number is Not Acceptable)

73501 OVERSEAS HIGHWAY

City

ISLAMORADA

FL

Zip Code

33036

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

Leslie E. Tassell
Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4-30-01

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TASSELL, LESLIE E 3225-32ND STREET, SE GRAND RAPIDS MI 49512	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WISNER, THOMAS E 3225-32ND STREET, S.E. GRAND RAPIDS MI 49512	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WISNER, JOYCE S 3225-32ND STREET, S.E. GRAND RAPIDS MI 49512	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BOTTRALL, DAVID C 3225-32ND STREET, S.E. GRAND RAPIDS MI 49512	<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	P.D TASSELL, LESLIE E. 3145 SHAFER ROAD S.E. KENTWOOD, MI 49512	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WISNER, THOMAS A. 3145 SHAFER ROAD S.E. KENTWOOD, MI 49512	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T WISNER, JOYCE S. 3145 SHAFER ROAD S.E. KENTWOOD, MI 49512	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BOTTRALL, DAVID C. 3145 SHAFER ROAD S.E. KENTWOOD, MI 49512	<input checked="" 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

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:

Leslie E. Tassell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-01

Date

616-676-2570

Daytime Phone #

CR2E034 (10/00)