

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **G47322**

1. Entity Name

LEE REALTY OF PINELLAS, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90061 044 ***158.75

Principal Place of Business

**15500 N EVERGREEN THE LANDINGS
2E SUITE A
CLEARWATER FL 34622
US**

Mailing Address

**18105 WOODCREEK PL.
LUTZ FL 33549
US**

2. Principal Place of Business

3. Mailing Address

4664 BERWYN CT.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

PALM HARBOR, FL.

Zip

Country

Zip

Country

34685-2619

U.S.

4. FEI Number **59-2303576**

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

**LEE, CHARLES R III
18105 WOODCREEK PL.
LUTZ FL 33549**

Name

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

4664 BERWYN CT.

City

PALM HARBOR

FL

Zip Code

34685-2619

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, 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 **PDST** ☐ Delete
NAME **LEE, CHARLES R III**
STREET ADDRESS **18105 WOODCREEK PL.**
CITY-ST-ZIP **LUTZ FL 33549**

TITLE ☒ Change ☐ Addition
NAME **4664 BERWYN CT.**
STREET ADDRESS **PALM HARBOR, FL**
CITY-ST-ZIP **34685-2619**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

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:

CHARLES R. LEE III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/01
Date

727-934-2258
Daytime Phone #

CR2E034 (10/00)