2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

G78720 **DOCUMENT #**

1. Entity Name

SHIRLEY LAND DEVELOPMENT, INC.



Apr 04, 2003 8:00 am 5 Secretary of State 04-04-2003 90108 005 ***150.00 **FILED**

					WE TO						
Principal Place of Business -% WILLIAM_O. SHIRLEY. JR. 1301-35TH AVENUE WEST BRADENTON FL 34205			Mailing Address % William O. Shirley. Jr. 1301-35TH AVENUE WEST BRADENTON FL 34205				<u> </u>		<u>-</u>		-
2. Principal Place of Business			3. Mailing Address				(1814 81817 (881	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES					
City & State			City & State		4. FEI Number 59-2362680				Applied For Not Applicable		
Zip Country 6. Name and Address of Current			Zip Count		try			8.75 Additional			
	b. Name a	ina Address of Current	t Hegistered Agent	Name Name			7. Haine and Address of New negistered Agent				
SHIRLEY, PATRICIA R			Street Addre			s (P.O. Box Number is Not Acceptable)					┨
827 HILLCREST DR Bradenton FL 34209				our our ridge day	(1.0.0	OX TOTAL PROPERTY				$\frac{1}{2}$	
	. * ;				City			FL	Zip Cod	e	1
	named entity tions of registe		or the purpose of changing its	registere	ed office or registe	red ag	ent, or both, in the State of Flori	da. I am fa	ımiliar with,	and accept	
SIGNATURE .	Signature, typed o	r printed name of registered agent	t and title if applicable. (NOTE	E: Registere	d Agent signature require	d when re	einstating)	DATE			
Afte	r May 1, 200	FEE IS \$150.00 Fee will be \$550.00 Florida Department of	1	-	وسهار ساد ت	- س	.~ • 9. Election Campaign: Fina Trust Fund Contribution.			00 May Be d to Fees	
10.	T==:	OFFICERS AND		11.		AD	DITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	S IN 11	١,
TITLE NAME STREET ADDRESS	ST SHIRLEY, V 827 HILLCF	VILLIAM O., JR. REST DR	☐ Delete	TITLI Nam Stre					☐ Change	Addition	74 (10/05
CITY-ST-ZIP		N FL 34209		CITY	-ST-ZIP						֝֟֝֞֝֟֝֟֝֝֟֝֟֝֝֟֝֝֟֝֝֟֝֝֟֝֟֝֝֟֝֟֝ ֖֖֖֖֖֓
TITLE NAME	P Shirley, P	ATRICIA R	☐ Delete	TITLI					Change	☐ Addition	5
STREET ADDRESS CITY-ST-ZIP	827 HILLCF			STRE	ET ADORESS -ST-ZIP						
TITLE NAME	V SHIRLEY, V	VILLIAM B	□X Delete	TITLI NAM	·				☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP	6507 29TH BRADENTO	AVE. W. N FL 34209			ET ADDRESS -ST-ZIP						
TITLE NAME			☐ Delete	TITLI NAM					Change .	☐ Addition	
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS -ST-ZIP						
TITLE NAME			☐ Delete	TITLE					☐ Change	Addition	
STREET ADDRESS CITY-ST-ZIP				STRE	ET ADDRESS - ST-ZIP						-
TITLE	-,		- Delete	TITLE					. Change	☐ Addition	1
STREET ADDRESS CITY-ST-ZIP				STRE	ET ADDRESS - ST-ZIP						
12. I hereby of indicated of the cor	l on this report	or supplemental report i receiver or trustee emp	is true and accurate and that n	the exe	mption stated in Se	come l	119.07(3)(i), Florida Statutes. I flegal effect as if made under oadda Statutes; and that my name	the that I ar	n an officer	or director	

SIGNATURE: <u>4/02/03 941-746-49</u>34