

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90045 006 ***150.00

0516076

DOCUMENT # H28947

1. Entity Name
LOPER-GREENE DEVELOPMENT CORPORATION

Principal Place of Business 5336 BOLD VENTURE PLACE WESLEY CHAPEL FL 33544 US	Mailing Address 5336 BOLD VENTURE PLACE WESLEY CHAPEL FL 33544 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2474953	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~LOPER, EDWARD T
 1825 NORTH HWY. 41
 INVERNESS FL 34450~~

7. Name and Address of New Registered Agent

Name **EDWARD T LOPER**
 Street Address (P.O. Box Number is Not Acceptable)
5336 BOLD VENTURE PL
 City **WESLEY Chapel** FL **33544**

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 **EDWARD T LOPER** *Edward T Loper* DATE **1/20/01**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	LOPER, SUSAN L.	
STREET ADDRESS	2254 COACHMAN RD.	
CITY-ST-ZIP	SPRING HILL FL	
TITLE	PT	<input checked="" type="checkbox"/> Delete
NAME	LOPER, EDWARD T.	
STREET ADDRESS	2254 COACHMAN RD.	
CITY-ST-ZIP	SPRING HILL FL	
TITLE	P	<input type="checkbox"/> Delete
NAME	LOPER, EDWARD T.	
STREET ADDRESS	5336 BOLD VENTURE PL	
CITY-ST-ZIP	WESLEY Chapel, FL 33544	
TITLE	S	<input type="checkbox"/> Delete
NAME	HARRIGAN, Kimberly	
STREET ADDRESS	3955 WATERVIEW LOOP	
CITY-ST-ZIP	WINTER PARK, FL 32792	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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: **EDWARD T LOPER** *Edward T Loper* DATE **1/20/01** DAYTIME PHONE # **813 907 5381**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/00)