

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H38668

1. Entity Name

PECK REALTY & CONDOMINIUM DEVELOPMENT, INC.

FILED
Jan 10, 2002 8:00 am
Secretary of State

01-10-2002 90002 004 ***158.75

0012837 AV

Principal Place of Business Mailing Address
% EDWIN W. PECK % EDWIN W. PECK
2430 S. ATLANTIC AVE. 2430 S. ATLANTIC AVE.
DAYTONA BEACH SHORES FL 32118-5418 DAYTONA BEACH SHORES FL 32118-5418



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
2430 S. ATLANTIC AVE 2430 S. ATLANTIC AVE
Suite, Apt. #, etc. Suite "E" Suite "E"

City & State City & State
DAYTONA BEACH SHORES DAYTONA BEACH SHORES
Zip FL 32118 Country USA Zip FL 32118 Country USA

4. FEI Number 59-2485164 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

PECK, EDWIN W
2430 S. ATLANTIC AVE. 32118
DAYTONA BEACH SHORES FL 32118

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

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 _____ DATE _____
(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, 2002 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	PVS	<input type="checkbox"/> Delete
NAME	PECK, EDWIN W	
STREET ADDRESS	2625 S. ATLANTIC AVE.	
CITY-ST-ZIP	DAYTONA BEACH SH FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	PECK, EDWIN W	
STREET ADDRESS	2625 S. ATLANTIC AVE.	
CITY-ST-ZIP	DAYTONA BEACH SH FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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		
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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 ~~the~~ empowered.

SIGNATURE: Edwin W. Peck, Jr. 1/4/02 1(386) 257-5000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)