

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 28, 2002 8:00 am
Secretary of State

03-28-2002 90036 031 ***150.00

DOCUMENT # H64404

1. Entity Name
FIRST CLASS PROPERTIES, INC.

Principal Place of Business
1500 BEVILLE ROAD
SUITE 202
DAYTONA BEACH FL 32114
US

Mailing Address
1500 BEVILLE ROAD
SUITE 202
DAYTONA BEACH FL 32114
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2552699**

Applied For
 Not Applicable

Zip

Country

Zip

Country

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

ERISMAN, MARTY H
137 KEY COLONY COURT
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 *Marty Erisman*
Signature typed or printed below of registered agent and file 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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☐ Delete
NAME **ERISMAN, MARTY H**
STREET ADDRESS **137 KEY COLONY COURT**
CITY-ST-ZIP **DAYTONA BEACH SHORES FL 32118**

TITLE **PD** ☒ Change ☐ Addition
NAME **ERISMAN, MARTY H**
STREET ADDRESS **143 KEY COLONY COURT**
CITY-ST-ZIP **DAYTONA BEACH SHORES, FL 32118**

TITLE **STDP** ☐ Delete
NAME **ERISMAN, MARTY**
STREET ADDRESS **137 KEY COLONY COURT**
CITY-ST-ZIP **DAYTONA BEACH SHORES FL 32118**

TITLE **STDP** ☐ Change ☐ Addition
NAME **ERISMAN, MARTY**
STREET ADDRESS **143 KEY COLONY COURT**
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ 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:

Marty Erisman
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)