

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H73441

1. Entity Name
FRANK HOMES DEVELOPMENT, INC.

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

04-26-2001 90125 043 ***150.00

Principal Place of Business

3713 72ND TERR E
SARASOTA FL 34243
US

Mailing Address

PO BOX 1400
TALLEVAST FL 34270-1400
US

2. Principal Place of Business

101 HARRISON AVE
Suite, Apt. #, etc.

3. Mailing Address

101 HARRISON AVE
Suite, Apt. #, etc.

City & State

BELLEAIR BEACH, FL
Zip 34635 Country PINELLAS

City & State

BELLEAIR BEACH, FL
Zip 34635 Country PINELLAS

4. FEI Number **59-2597908**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JONASSEN, WILLIAM S., ESQUIRE
10785 ULMERTON ROAD SOUTHEAST
LARGO FL 34648

7. Name and Address of New Registered Agent

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

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

TITLE PD
NAME FRANK, RONALD
STREET ADDRESS 14535 MARK DRIVE
CITY-ST-ZIP LARGO FL ☐ Delete

TITLE S
NAME FRANK, RONALD
STREET ADDRESS 14535 MARK DRIVE
CITY-ST-ZIP LARGO FL ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
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CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 101 HARRISON AVE.
CITY-ST-ZIP BELLEAIR BEACH, FL 34635 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 101 HARRISON AVE.
CITY-ST-ZIP BELLEAIR BEACH, FL 34635 ☒ Change ☐ Addition

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)