

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90233 020 ***150.00

DOCUMENT # H96304

1. Entity Name

REALAND, INC.

Principal Place of Business

Mailing Address

**4134 GULF OF MEXICO DRIVE
 SUITE 302
 LONGBOAT KEY FL 34228
 US**

**4134 GULF OF MEXICO DRIVE
 SUITE 302
 LONGBOAT KEY FL 34228-2614
 US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2681743

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

**MURRAY, TAD
 8588 POTTER PARK
 SARASOTA FL 34238**

Name

ANTHONY J. BROWN

Street Address (P.O. Box Number is Not Acceptable)

4134 GULF OF MEXICO DR.

City

LONGBOAT KEY

FL

Zip Code

34228

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, 2000 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 **P/D** ☒ Delete
 NAME **MURRAY, TAD**
 STREET ADDRESS **8588 POTTER PARK**
 CITY-ST-ZIP **SARASOTA FL 34238**

TITLE **PSTD** ☒ Change ☐ Addition
 NAME **BROWN, ANTHONY J.**
 STREET ADDRESS **4134 GULF OF MEXICO DR.**
 CITY-ST-ZIP **LONGBOAT KEY, FL 34228**

TITLE **VSTD** ☐ Delete
 NAME **BROWN, ANTHONY J**
 STREET ADDRESS **4134 GULF OF MEXICO DRIVE, STE. 302**
 CITY-ST-ZIP **LONGBOAT KEY FL 34228**

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

TITLE ☐ Delete
 NAME
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TITLE ☐ Change ☐ Addition
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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:

Anthony J. Brown
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

APRIL 27, 2000

Daytime Phone #