

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2003 8:00 am
Secretary of State

03-27-2003 90126 030 ***150.00

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DOCUMENT # J00570

1. Entity Name
OCTAGON ASSOCIATES, INC.



Principal Place of Business
655 21ST ST. (329631399)
P.O. BOX 6370
VERO BCH. FL 32961-3370

Mailing Address
655 21ST ST. (329631399)
P.O. BOX 6370
VERO BCH. FL 32961-3370



2. Principal Place of Business
3717 10th Court
Suite, Apt. #, etc.

3. Mailing Address
800 8th Street
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
Vero Beach, FL

City & State
Vero Beach, FL

4. FEI Number
59-2651478

Applied For
Not Applicable

Zip
32960

Country

Zip
32962

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

HAMILTON, S. THOMAS JR.
655 21ST ST.
VERO BCH. FL 32961

Name
William B. Mills
Street Address (P.O. Box Number is Not Acceptable)
800 8th Street

City
Vero Beach **FL** Zip Code
32962

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *William B. Mills* **3-25-03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
PERKINS, LOUIS E. ☐ Delete
4005 20TH ST.
VERO BEACH FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DTS ☐ Change ☒ Addition
Shelby H. Perkins
4005 20th Street
Vero Beach, FL 32960

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVP ☒ Delete
DONALD D. GOLD
655 21ST STREET
VERO BEACH FL

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT ☒ Delete
HAMILTON, S. THOMAS, JR
655 21ST ST. #200
VERO BEACH FL

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS ☒ Delete
E.J. VANN
655 21ST STREET, # 200
VERO BEACH FL

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Shelby H. Perkins*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-21-03 **771-569-3798**
Date Daytime Phone #

CR2E034 (10/02)