

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **J13216**

1. Entity Name

Peavy Retirement Center, Inc.

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90361 015 ***150.00

A0070835

DO NOT WRITE IN THIS SPACE

Principal Place of Business Peavy Retirement Center Inc 1341 S.W. Ave D Belle Glade Fla 33430		Mailing Address P.O. Box 1043	
2. Principal Place of Business 1341 S.W. Ave D		3. Mailing Address P.O. Box 1043	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Belle Glade		City & State Belle Glade Fla	
Zip 33430	Country Palm Beach	Zip 33430	Country Palm Beach
4. FEI Number		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input checked="" type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent Margaret E Peavy 1352 6 st West Palm Beach Fla 33401		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 Margaret E Peavy DATE April 17, 2001 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) <input type="checkbox"/>		10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
FILE NOW!!! FEE IS \$150.00 After MAY-1, 2001 Fee will be \$550.00 Make Check Payable to Department of State			
11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE owner NAME Margaret E Peavy <input type="checkbox"/> Delete STREET ADDRESS 1352 6 st CITY-ST-ZIP West Palm Beach FL 33401		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE owner NAME Hans Peavy <input type="checkbox"/> Delete STREET ADDRESS 1352 6 st CITY-ST-ZIP West Palm Beach Fla 33401		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE Secretary NAME Margaret Peavy <input type="checkbox"/> Delete STREET ADDRESS 1352 6 st CITY-ST-ZIP West Palm Beach Fla 33401		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP		TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP	
TITLE <input type="checkbox"/> Delete NAME 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 like empowered.

SIGNATURE: **Margaret E Peavy**

April 17-01 561-8021763

CR2E034 (11/00)