

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J14828

1. Entity Name

TWBJT REALTY ENTERPRISES, INC.

FILED
May 11, 2001 8:00 am
Secretary of State

05-11-2001 90092 027 ***158.75

Principal Place of Business

11062 SOUTH MILITARY TRAIL
SUITE 418
BOYNTON BEACH FL 33436-5248

Mailing Address

11062 SOUTH MILITARY TRAIL
SUITE 418
BOYNTON BEACH FL 33436-5248

2. Principal Place of Business

12609 Lake Denise Blvd

3. Mailing Address

12609 LAKE DENISE BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Clermont

City & State

CLERMONT

Zip

34711

Country

FLA

Zip

34711

Country

LAKE



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2688454

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LEONARD, WILLIAM ROBERT
633 SOUTH ANDREWS AVENUE, SUITE 402
FT. LAUDERDALE FL 33301

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 P
NAME REILLY, JAMES
STREET ADDRESS 6918 CRIDERS RD.
CITY-ST-ZIP MARS PA 16046 ☐ Delete

TITLE ST
NAME REILLY, TIMOTHY
STREET ADDRESS 6918 CRIDERS RD.
CITY-ST-ZIP MARS PA 16046 ☐ Delete

TITLE VP
NAME REILLY, WILLIAM
STREET ADDRESS 6918 CRIDERS RD.
CITY-ST-ZIP MARS PA 16046 ☐ Delete

TITLE
NAME
STREET ADDRESS
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 P
NAME Reilly James
STREET ADDRESS 12609 Lake Denise Blvd
CITY-ST-ZIP Clermont Fla 34711 ☒ Change ☐ Addition

TITLE ST
NAME Reilly Timothy
STREET ADDRESS 12609 Lake Denise Blvd
CITY-ST-ZIP Clermont Fla 34711 ☒ Change ☐ Addition

TITLE VD
NAME Reilly William
STREET ADDRESS 12609 Lake Denise Blvd
CITY-ST-ZIP Clermont Fla 34711 ☒ 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:

JAMES REILLY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/01 (352) 429-2885

Date

Daytime Phone #

CR2E034 (10/00)

0309079