

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2002 8:00 am
Secretary of State

05-10-2002 90016 014 ***150.00

DOCUMENT # J48090

1. Entity Name

HUNTINGTON REALTY COMPANY

Principal Place of Business

~~4720 SE 15TH AVE~~
~~SUITE 201~~
~~CAPE CORAL FL 33904~~

Mailing Address

~~4720 SE 15TH AVE~~
~~SUITE 201~~
~~CAPE CORAL FL 33904~~

2. Principal Place of Business

P.O. Box 2447
 Suite, Apt. #, etc. }

3. Mailing Address

P.O. Box 2447
 Suite, Apt. #, etc.

City & State

BONITA SPRINGS FL

City & State

BONITA SPRINGS FL

4. FEI Number

59-2757780

Applied For

Not Applicable

Zip **34133**
~~33904~~

Country

Zip **34133**

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BURKE, YVONNE H

~~4720 SE 15TH AVE STE 201~~
~~CAPE CORAL FL 33904~~

7. Name and Address of New Registered Agent

Name

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

4707 ENTERPRISE AVE #2

City

NAPLES

FL

Zip Code

34104

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

Yvonne Burke
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/29/02

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, 2002 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 **PVD** ☐ Delete
 NAME **BURKE, YVONNE**
 STREET ADDRESS ~~4720 SE 15TH AVE #201~~
 CITY-ST-ZIP ~~CAPE CORAL FL 33904~~

TITLE **S** ☐ Delete
 NAME **JOHNSON, BERNARD**
 STREET ADDRESS ~~4720 SE 15TH AVE~~
 CITY-ST-ZIP ~~CAPE CORAL FL 33904~~

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **4707 ENTERPRISE AVE #2**
 CITY-ST-ZIP **NAPLES FL 34104**

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **15801 TAMARIND CAY**
 CITY-ST-ZIP **FT. MYERS FL 33908**

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

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

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

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 reports 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 #

Bernard Johnson **4/29/02 341-246-9191**

CR2E034 (9/01)