## **2003 FOR PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT #

J82283

1. Entity Name

ISLAND PILING, INC.



## **FILED** Jan 13, 2003 8:00 am Secretary of State 01-13-2003 90084 003 \*\*\*150.00

Principal Plac					- 1	GOO WE TH					
1750 J-C BLV		s		g Address J-C BLVD							
#2			#2								
NAPLES FL 3	34109			ES FL 34109				† (80)    0:0  (8)  0 (10)0 (100) (0)  0 (10)	SKI STERI ALGU DISI	N 81211 S1811 1881	
US			US						ali eleikalek ele		
2. Principal P	Place of Busin	ness		ing Address	<u> </u>		-				
Suite, Apt. #, etc.			Suite, Apt. #, etc.					☐ CHECK HERE IF MAKING CHANGES			
City & State			City & State				4.	4. FEI Number 59-2823590 Applied For Not Applied by Applied For			
Zip		Country	Zip		Countr	ту	5.	Certificate of Status Desired	\$8.75 A	dditional	
	6. Name	and Address of Current	Registere	d Agent	1	<del></del>	7.	Name and Address of New Register	•	-	
	-,	***	-			Name -			ed Agent		
PITKIN, JE	erald r				Į.						
801 ANCHOR RODE #203			Street Address			(P.O. Box Number is Not Acceptable)					
NAPLES F		# 250								<u></u>	
			City			FL Zip Code					
8. The above the obligati	named entity ions of registe	submits this statement for ered agent.	r the purpo	se of changing its	registered	d office or registe	ered ac	gent, or both, in the State of Florida. Ta	am familiar with	, and accept	
SIGNATURE _		or printed name of registered agent a	and title if appli	cable. (NOTE	E: Registered	Agent signature require	d when	reinstating) DAT	E		
				***				T DAT		<del></del>	
After	May 1, 200	FEE IS \$150.00 Fee will be \$550.00 Florida Department of	State					S. Election Campaign Financing     Trust Fund Contribution.	\$5.0 □ Adde	00 May Be	
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10.		OFFICERS AND I			11.		ΑE	DDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR		
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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date