## 2000 UNIFORM BUSINESS REPORT (UBR)

## FILED Jan 12, 2000 8:00 am DOCUMENT # KO3777 1. Entity Name **Secretary of State** T & E REALTY, INC. 01-12-2000 90074 038 \*\*\*150.00 Mailing Address Principal Place of Business 5764 MARBLE COURT 5764 MARBLE COURT WINTER PARK FL 32792-9358 WINTER PARK FL 32792 00000613 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0015558 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MARTIN, THOMAS J 5764 marble court Street Address (P.O. Box Number is Not Acceptable) winterpak FL 32792 1400-TALLWOOD AVE #103-HOLLYWOOD FL 33021 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Change ☐ Addition ☐ Delete TITLE TITI F MARTIN, THOMAS J NAME 5164 marbect STREET ADDRESS STREET ADDRESS 1400 TALLWOOD AVE #103 Winter Park FL CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Addition ☐ Change **VPS** 5164 marke Court TITLE TITLE MARTIN, EVELYN G NAME NAME 1400 TALLWOOD AVE-#109- Writze Park, FL STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ Addition ☐ Delete Change TITLE MARTIN, THOMAS JOSEPH NAME 5329 CYPRESS RESERVE PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP" CITY-ST-ZIP-WINTER PARK FL-32792 ☐ Delete TITLE Change Addition TITLE MARTIN, JAMES F. NAME NAME **48 MAPLE TERRACE** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WEST SPRINGFIELD MA 01089** ☐ Delete Change TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P ☐ Addition ☐ Delete TITLE Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered