

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 25, 2002 8:00 am**  
**Secretary of State**

02-25-2002 90051 002 \*\*\*158.75

**DOCUMENT # K11985**

**1. Entity Name**  
**PRESTIGE COMMUNICATIONS, INC.**

**Principal Place of Business**

**326 EASTERN AVE**  
**ST. CLOUD FL 34769**

**Mailing Address**

**326 EASTERN AVE**  
**ST. CLOUD FL 34769**

**2. Principal Place of Business**

**3. Mailing Address**

**Suite, Apt. #, etc.**

**Suite, Apt. #, etc.**

**City & State**

**City & State**

**Zip**

**Country**

**Zip**

**Country**

**4. FEI Number** **59-2871187**

**Applied For**

**Not Applicable**

**5. Certificate of Status Desired** ☐

**\$8.75 Additional**  
**Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**BRIGHT, SR., GLENN R.**  
**326 EASTERN AVE.**  
**ST. CLOUD FL 34769**

**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, 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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	BRIGHT, GLENN R. SR	326 EASTERN AVE	ST CLOUD FL 34769-2519	<input type="checkbox"/>
ST	BRIGHT, MARJORIE	326 EASTERN AVE	ST CLOUD FL 34769-2519	<input type="checkbox"/>
V	BRIGHT, GLENN R JR	25008 SIGNAL BUTTE RD	QUEEN CREEK AZ 85242	<input checked="" type="checkbox"/>
V	BRIGHT, THOMAS LESLIE	4770 HUNTING LODGE RD	ST. CLOUD FL	<input checked="" type="checkbox"/>
V	BRIGHT, GLENN R JR	25008 S SIGNAL BUTTE ROAD	QUEEN CREEK AZ 85242-9189	<input type="checkbox"/>
V	BRIGHT, THOMAS L	4770 HUNTING LODGE ROAD	SAINT CLOUD FL 34772-8068	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

**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 title empowered.**

**SIGNATURE:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)