

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90568 031 ***150.00

0306054 AV

DOCUMENT # K52165

1. Entity Name

NAPIC REALTY, INC.

Principal Place of Business

**140 INTRACOASTAL PTE DR.
 SUITE 212
 JUPITER FL 33477
 US**

Mailing Address

**C/O DAVID H GIBBONS
 P O BOX 3659
 TEQUESTA FL 33469
 US**

00095020



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

399 Tequesta Drive

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Ste. 101

City & State

City & State

Tequesta, FL

Zip

33469

Country

USA

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

BREWSTER, JOANN

140 INTRACOASTAL PT. DR.

#212

JUPITER FL 33477

7. Name and Address of New Registered Agent

Name

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

339 Tequesta Drive, Suite 101

City

Tequesta

FL

Zip Code

33469

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 **PD** ☐ Delete
 NAME **GIBBONS, DAVID H.**
 STREET ADDRESS **4966 COUNTY LINE RD**
 CITY-ST-ZIP **TEQUESTA FL**

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

TITLE **ST** ☐ Delete
 NAME **BREWSTER JOANN**
 STREET ADDRESS **4966 COUNTY LINE RD**
 CITY-ST-ZIP **TEQUESTA FL**

TITLE ☐ Change ☐ Addition
 NAME ☐ Change ☐ Addition
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CR2E034 (9/01)

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: **DAVID H. GIBBONS** **4/22/02** **561-745-9700**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR **PRESIDENT** Date Daytime Phone #