

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # K85758

1. Entity Name

HARPER & HARPER REALTY, INC.

FILED
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90025 008 ***163.75

Principal Place of Business

3800
3800 S ROOSEVELT BLVD
N-107
KEY WEST FL 33040

Mailing Address

3800
3800 S ROOSEVELT BLVD
N-107
KEY WEST FL 33040-5201

2. Principal Place of Business

3800 S. ROOSEVELT BLVD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

KEY WEST FL

City & State

Zip

Country

33040

MONROE

4. FEI Number

65-0118257

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HARPER, WILLIAM
3930 S. ROOSEVELT BLVD. N107
KEY WEST FL 33040

7. Name and Address of New Registered Agent

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, 2000 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 PST ☐ Delete
NAME HARPER, WILLIAM
STREET ADDRESS 3930 S ROOSEVELT BLVD N-107
CITY-ST-ZIP KEY WEST FL

TITLE D ☐ Delete
NAME HARPER, WILLIAM
STREET ADDRESS 3930 S ROOSEVELT BLVD N-107
CITY-ST-ZIP KEY WEST FL

TITLE D ☐ Delete
NAME TOMASIN, HARPER
STREET ADDRESS 3930 S ROOSEVELT BLVD N-107
CITY-ST-ZIP KEY WEST FL

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
CITY-ST-ZIP

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

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

TITLE ☐ Change ☐ Addition
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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 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: *William Harper* REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/10/2000 (305) 296-3672

CR2E034 (9/99)