

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90019 012 ***150.00

DOCUMENT # L18381

1. Entity Name
F.T.D. REALTY AND MANAGEMENT CO., INC.

Principal Place of Business

**C/O FRED ESPENSCHIED
 1738 SW BILTMORE STREET
 PORT ST. LUCIE FL 34984**

Mailing Address

**C/O FRED ESPENSCHIED
 1738 SW BILTMORE STREET
 PORT ST. LUCIE FL 34984**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

9815 S OCEAN DR.

3. Mailing Address

9815 S. OCEAN DR.

Suite, Apt. #, etc.

#5

Suite, Apt. #, etc.

#5

City & State

JENSEN BEACH, FL

City & State

JENSEN BEACH, FL

Zip

34957

Country

Zip

34957

Country

4. FEI Number

65-0157465

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**ESPENSCHIED, FRED
 1738 SW BILTMORE STREET
 PORT ST. LUCIE FL 34984**

7. Name and Address of New Registered Agent

Name

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

9815 S. OCEAN DR.

#5

City

JENSEN BEACH

FL

Zip Code

34957

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.

FRED ESPENSCHIED, PRES

4-22-02

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

TITLE **D** ☐ Delete
 NAME **ESPENSCHIED, FRED**
 STREET ADDRESS **1738 SW BILTMORE STREET**
 CITY-ST-ZIP **PORT ST. LUCIE FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
 NAME
 STREET ADDRESS **9815 S. OCEAN DR. #5**
 CITY-ST-ZIP **JENSEN BEACH, FL 34957**

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:  **FRED ESPENSCHIED** **4-22-02** **(772) 878-0811**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)