2002 UNIFORM BUSINESS REPORT (UBR)

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changed, or on an attachment with an address

SIGNATURE:

with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jun 18, 2002 8:00 am Secretary of State DOCUMENT # L35442 06-18-2002 90488 013 ***150.00 1. Entity Name PARK SHORE MANAGEMENT & REALTY CO. Mailing Address Principal Place of Business P.O. BOX 11052 1010 FIFTH AVE SOUTH 8995-88 335 NAPLES FL 34101 NAPLES FL 34102 US US 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suita, Apt. #, etc. City & State City & State 4. FEI Number Applied For 65-0163621 Not Applicable Country Country \$8.75 Additional Zip 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent DEVLIN, ROBERT E. Street Address (P.O. Box Number is Not Acceptable) 600 NEAPOLITAN WAY APT. 258 NAPLES FL 33940 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 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 11. OFFICERS AND DIRECTORS 12. (9/01) Addition TITLE ☐ Change TITLE ☐ Delete DEVLIN, ROBERT E. NAME NAME CR2E034 STREET ADDRESS 600 NEAPOLITAN WAY #258 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP naples fl Addition Change ☐ Delete TITLE TILE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change Addition 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

FILED



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FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

June 2, 2002

PARK SHORE MANAGEMENT & REALTY CO. P.O. BOX 11052 8995-88 NAPLES, FL 34101 US

Subject: PARK SHORE MANAGEMENT & REALTY CO.

Reference Number:

L35442

Please be advised, we have received your annual report/uniform business report; however, the report <u>has not been filed</u> and a copy is being returned for the following correction(s):

The check submitted is not payable to this office. Please make your check payable to the Department of State.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/VS.

ANNUAL REPORTS SECTION

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