

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

U358012

DOCUMENT # L57461

1. Entity Name

SOUTHEAST REALTY INTERESTS, INC.

05-15-2001 90200 023 ***150.00

Principal Place of Business

Mailing Address

C/O DAVID A. JENKINS
 222 SECOND ST NORTH
 ST. PETE FL 33701
 US

% DAVID A. JENKINS
 222 SECOND STREET NORTH
 ST. PETERSBURG FL 33701

00053482



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

100 Second Avenue North

3. Mailing Address

PO Box 429

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 200

City & State

City & State

St Petersburg, FL
 Zip Country
33701 Pinellas

St Petersburg, FL
 Zip Country
33731-0429 Pinellas

4. FEI Number **59-2994745**

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

JENKINS, DAVID A.
222 SECOND STREET NORTH
ST. PETERSBURG FL 33701

Name

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

100 Second Avenue North Suite 200

City

St Petersburg

FL

Zip Code

33701

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, 2001 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 **DP** ☐ Delete
 NAME **BRETT, DAVID A.**
 STREET ADDRESS **222 2ND ST. NORTH**
 CITY-ST-ZIP **ST PETERSBURG FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS **100 Second Avenue North Suite 200**
 CITY-ST-ZIP **St Petersburg, FL 33701**

TITLE **DS** ☐ Delete
 NAME **IRWIN, IAN F**
 STREET ADDRESS **222 SECOND ST. NORTH**
 CITY-ST-ZIP **ST. PETE FL**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS **100 Second Avenue North Suite 200**
 CITY-ST-ZIP **St Petersburg, FL 33701**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David A Brett, President

4/26/01

(727)821-5178

Date

Daytime Phone #

CR2E034 (10/00)