

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90167 034 ***150.00

DOCUMENT # **69792** ✓

1. Entity Name

ROYAL PALM BUILDERS, INC.

DO NOT WRITE IN THIS SPACE

656517

2. Principal Place of Business

5811 PELICAN BAY BLVD

3. Mailing Address

275 N. FRANKLIN TPKE

Suite, Apt. #, etc.

SUITE 208

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

NAPLES, FL

City & State

RAMSEY, NJ

4. FEI Number

65-0205038

Applied For

Not Applicable

Zip

33063

Country

USA

Zip

07446

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

LAWSON, LINDA A

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

866 99TH AVENUE, NORTH

City

NAPLES,

FL

Zip Code

33963

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) ☐

January 1 - May 1 Fee is \$150.00.

After May 1, Fee is \$550.00

Amended UBR is \$81.25

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	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
	D	COLEMAN, WILLIAM	275 N FRANKLIN TURNPIKE RAMSEY, NJ 07446				
	DV	BUTWIN, MARTIN	275 N. FRANKLIN TURNPIKE RAMSEY, NJ 07446				

DO NOT WRITE
IN THIS SPACE

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 on an attachment with an address with all other like empowered.

SIGNATURE: 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/01)