

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L73336

1. Entity Name

SEA PINES DEVELOPMENT CORPORATION

**FILED**  
**Feb 04, 2000 8:00 am**  
**Secretary of State**

02-04-2000 90012 028 \*\*\*150.00

Principal Place of Business

Mailing Address

% R PIERRE BROWN  
9160 ROE ST.  
PENSACOLA FL 32514-7031  
US

9160 ROE ST.  
127 EAST ZARAGOZA STREET  
PENSACOLA FL 32514-7031  
US

2. Principal Place of Business

3. Mailing Address

4300 Bayou Blvd.

4300 Bayou Blvd.

Suite # 23

Suite # 23

City & State  
Pensacola, FL

City & State  
Pensacola, FL

Zip  
32503

Country  
USA

Zip  
32503

Country  
USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3013565

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

BROWN, R. PIERRE  
9160 ROE ST.  
PENSACOLA FL 32514

Name Hess Financial Services, Inc.

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

4300 Bayou Blvd. Suite 23

City Pensacola FL Zip 32503

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 Sharon Hess Herrick (Sharon Hess Herrick)

1/26/00

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete  
NAME HESS, ROY L  
STREET ADDRESS 2403 BAYOU BLVD  
CITY-ST-ZIP PENSACOLA FL

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  
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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:

Roy L. Hess

Date

Daytime Phone #

850-432-0474

CR2E034 (9/99)