

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2002 8:00 am
Secretary of State

02-21-2002 90102 006 ***150.00

DOCUMENT # L92270

1. Entity Name
B & E REALTY, INC.

Principal Place of Business

6360 PRESIDENTIAL
4B
FT. MYERS FL 33919
US

Mailing Address

12346-3 WOODROSE CT
FT. MYERS FL 33907
US

2. Principal Place of Business

3. Mailing Address
1910 VIRGINIA AVE.

Suite, Apt. #, etc.

Suite, Apt. #, etc.
B202

City & State

City & State
FT. MYERS, FL 33901

Zip

Country

Zip
33901

Country
USA

4. FEI Number

65-0209045

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

POTTS, BETTE K.
12346-3 WOODROSE CT
FT MYERS FL 33907

7. Name and Address of New Registered Agent

Name

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

1910 VIRGINIA AVE.

City

FT. MYERS

FL

Zip Code

33901

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

Bette K. Potts

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, 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 **POTTS, BETTE K.**
STREET ADDRESS **12346-3 WOODROSE CT**
CITY-ST-ZIP **FT. MYERS FL**

TITLE **D** ☐ Delete
NAME **CHAFFIN, EDWARD W**
STREET ADDRESS **12346-3 WOODROSE CT**
CITY-ST-ZIP **FT. MYERS FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1910 VIRGINIA AVE. B202**
CITY-ST-ZIP **FT. MYERS, FL 33901**

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1910 VIRGINIA AVE. B 202**
CITY-ST-ZIP **FT. MYERS, FL 33901**

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

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

TITLE ☐ Change ☐ Addition
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:

Bette K. Potts
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-02

Date

941-416-8921

Daytime Phone #

CR2E034 (9/01)