

FILED
May 16, 2003 8:00 am
Secretary of State

05-16-2003 90183 044 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # L92770 1. Entity Name BOLTON PROPERTIES, INC.					
Principal Place of Business C/O MELISA D. CALABRESE 12858 80TH LANE N WEST PALM BEACH, FL 33412 US			Mailing Address C/O MELISA D. CALABRESE 12858 80TH LANE N WEST PALM BEACH, FL 33412 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-3026951	
5. Name and Address of Current Registered Agent CALABRESE, MELISSA D. 629 WEST FLAGLER STREET MIAMI, FL 33130				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
6. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent's signature required when registering) _____ DATE _____					
FILE NOW! FEE IS \$150.00 After May 1, 2003 Fee will be \$500.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CALABRESE, MELISSA D. 629 W. FLAGLER ST. MIAMI, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST WYLTISIE, GLENDA B. 629 W. FLAGLER ST. MIAMI, FL	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	 	<input type="checkbox"/> Delete			
12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Melissa D. Calabrese</u> <u>Melissa D. Calabrese</u> (561) 792-7515 <div style="display: flex; justify-content: space-between; font-size: small;"> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone </div>					

90135657



☐ CHECK HERE IF MAKING CHANGES

CR2034 (10/02)

Attachment
90135657
L92770

Bolton Properties, Inc.
12858 80th Lane North
West Palm Beach, Florida 33412

Division of Corporation
Uniform Business Reports Filings
P.O. Box 6327
Tallahassee, FL 32314

Re: Uniform Business Reports
FEI Number, 59-3026951

Dear Sir or Madam:

Enclosed is a copy of our Uniform Business Report which I downloaded from the computer. I never received the original report in the mail.

Sincerely,

Melissa D. Calabrese

Melissa D. Calabrese, President
Bolton Properties, Inc.