

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 24, 2001 8:00 am
Secretary of State

07-24-2001 90028 025 ***550.00

DOCUMENT # M77587

1. Entity Name

J.T.H. DEVELOPMENT CORPORATION

Principal Place of Business

**5380 NORTH OCEAN DRIVE
 SUITE 10H
 RIVIERA BEACH FL 33404-2534**

Mailing Address

**5380 NORTH OCEAN DRIVE
 SUITE 10H
 RIVIERA BEACH FL 33404-2534**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

36-3586458

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**DYTRYCH, MARTIN A.
 2700 PGA BLVD
 STE 203
 PALM BEACH FL 33410**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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 \$550.00
After September 12, 2001 Fee will be \$750.00
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 PD
 NAME LYONS, DEBBIE
 STREET ADDRESS 5380 N. OCEAN DR.
 CITY-ST-ZIP SINGER ISLAND FL ☐ Delete

TITLE VD
 NAME HUMES, J.T.
 STREET ADDRESS 5380 N. OCEAN DR.
 CITY-ST-ZIP SINGER ISLAND FL ☒ Delete

TITLE ST
 NAME PETRIDES, DESPIN L.
 STREET ADDRESS 5380 N. OCEAN DR.
 CITY-ST-ZIP SINGER ISLAND FL ☐ Delete

TITLE TD
 NAME PETRIDES, MILTON D.
 STREET ADDRESS 5380 N. OCEAN DR.
 CITY-ST-ZIP SINGER ISLAND FL ☐ Delete

TITLE DC
 NAME LYONS, CHRIS
 STREET ADDRESS 5380 N OCEAN DR #10 H
 CITY-ST-ZIP SINGER ISLAND FL ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE VD
 NAME LYONS, J.T.
 STREET ADDRESS 5380 N. OCEAN DR
 CITY-ST-ZIP SINGER ISLAND, FL. ☒ Change ☐ Addition

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

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

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

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

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 another like empowered.

SIGNATURE: MILTON D. PETRIDES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/24/01 561-842-9209
 Date Daytime Phone #

0071799 AV

CR2E034 (5/01)