

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N27888

FILED  
Apr 12, 2002 8:00 AM  
Secretary of State

Entity Name: 3309 PALMETTO, INC.

## Current Principal Place of Business:

11415 PALMETTO  
ALACHUA, FL 32615 US

## New Principal Place of Business:

## Current Mailing Address:

C/O ACTION REAORY  
6110-B NW 1 PL  
GAINESVILLE, FL 32607 US

## New Mailing Address:

C/O ACTION REALTY  
6110-B NW 1 PL  
GAINESVILLE, FL 32607 US

FEI Number: 59-2904601

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAUSAMAN, D. JEFFREY  
C/O ALDON REALTY  
6110 - B NW 1 PL  
GAINESVILLE, FL 32607 US

## Name and Address of New Registered Agent:

SAUSAMAN, D. JEFFREY  
C/O ACTION REALTY  
6110 - B NW 1 PL  
GAINESVILLE, FL 32607 US

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:

04/12/2002

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SCHULTE, TAMSIN  
Address: 64 TURKEY CREEK  
City-St-Zip: ALACHUA, FL

Title: D ( ) Delete  
Name: CELLON, JEAN  
Address: 80 TURKEY CREEK  
City-St-Zip: ALACHUA, FL 32615

Title: P ( ) Delete  
Name: BRYANT, BARBARA  
Address: 11419 PALMETTO DR  
City-St-Zip: ALACHUA, FL 32615

Title: STD ( ) Delete  
Name: GREEN, MARTHA J  
Address: 11413 PALMETTO BLVD.  
City-St-Zip: ALACHUA, FL 32615

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BARBARA BRYANT

PRES

04/12/2002

Electronic Signature of Signing Officer or Director

Date