

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P00 000002700

1. Entity Name

REINTEGRATION DEVELOPMENT INC

FILED

02 MAY 14 PM 1:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1600 NW 4 AVE

3. Mailing Address

1600 NW 4 AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
MELBOURN FL

City & State
MELBOURN FL

4. FEI Number
05-0987653

Applied For
Not Applicable

Zip
32944-3112

Country
USA

Zip
32944-3112

Country
USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

REBECCA RECONN GRANGER

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

1600 NW 4 AVE

MELBOURN FL

32944-3112

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 *Rebecca Granger*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

29 APR 12 2002

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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
NAME
STREET ADDRESS
CITY-ST-ZIP
REBECCA RECONN GRANGER
1600 NW 4 AVE MELBOURN FL 32944

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
300005598503--7
-05/23/02--01001--005
****150.00 ****150.00

TITLE
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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 on an attachment with an address with all other like empowered.

SIGNATURE:

Rebecca Granger REBECCA GRANGER 29 APR 12 2002

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

361 215 2711

CR2E034B (12/01)