

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 03, 2003 8:00 am**  
**Secretary of State**

04-03-2003 90127 042 \*\*\*150.00

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**DOCUMENT # P00000009815**

1. Entity Name

CLOVER PROPERTIES OF PENSACOLA, INC.



Principal Place of Business

2268 LA VISTA AVENUE  
PENSACOLA FL 32504

Mailing Address

2268 LA VISTA AVENUE  
PENSACOLA FL 32504

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

65-0980458

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

ETHERIDGE, BRENTON L.  
209 MASSACHUSETTS AVENUE  
PENSACOLA FL 32505

7. Name and Address of New Registered Agent

Name

J. Bruce Vredenburg

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

2153 Copley Drive

Pensacola, FL 32503

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

J. Bruce Vredenburg

J. Bruce Vredenburg

4-1-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DTS ☐ Delete  
NAME VREDBURG, J. BRUCE  
STREET ADDRESS 2153 COPLEY DR.  
CITY-ST-ZIP PENSACOLA FL 32503

TITLE DP ☐ Delete  
NAME ETHERIDGE, BRENTON L  
STREET ADDRESS P.O. BOX 17432  
CITY-ST-ZIP PENSACOLA FL 32522

TITLE DV ☐ Delete  
NAME HELTON, JEROME H  
STREET ADDRESS P.O. BOX 17432  
CITY-ST-ZIP PENSACOLA FL 32522

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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:

J. Bruce Vredenburg

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-03 (850) 438-5367

Date

Daytime Phone #

CR2E034 (10/02)