

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000012166

1. Entity Name
SQUILLANTE PROPERTIES, INC.

FILED
Jun 20, 2001 8:00 am
Secretary of State

06-20-2001 90001 043 ***558.75

Principal Place of Business
**1007 BRISTOL LAKE ROAD #207
MT. DORA FL 32757**

Mailing Address
**1007 BRISTOL LAKE ROAD #207
MT. DORA FL 32757**

2. Principal Place of Business
34825 Marshall Road
Suite, Apt. #, etc.

3. Mailing Address
34825 Marshall Road
Suite, Apt. #, etc.

City & State
Eustis Florida

City & State
Eustis Florida

4. FEI Number
59-3624441

Applied For
☐ Not Applicable

Zip
32736

Country
USA

Zip
32736

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

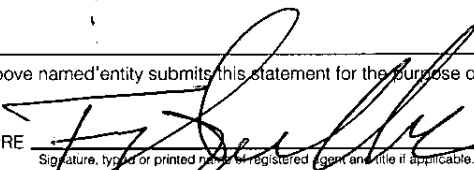
**LABRET, STEVEN M
226 HILLCREST STREET
ORLANDO FL 32801**

Name
TERRY A. SQUILLANTE
Street Address (P.O. Box Number is Not Acceptable)

34825 Marshall Road

City
Eustis FL Zip Code
32736

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  **TERRY SQUILLANTE**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE
6/01/01

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SQUILLANTE, TERRY A
1007 BRISTOL LAKE ROAD #207
MT. DORA FL 32757** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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CITY-ST-ZIP
☐ 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
**P.V.A.T.D.
TERRY A. Squillante
34825 Marshall Road
Eustis, Florida 32736** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S. D.
VALERIE J. Squillante
34825 Marshall Road
Eustis Florida 32736** ☐ 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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE
6/1/01

DAYTIME PHONE #
352-589-8848

CR2E034 (10/00)