

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90039 042 ***150.00

DOCUMENT # P00000013386

1. Entity Name

CATALPA GROUP, INC.

Principal Place of Business

**11510 VILLA GRAND #424
FORT MYERS FL 33913**

Mailing Address

**11510 VILLA GRAND #424
FORT MYERS FL 33913**

00077308



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

15831 White Orchid Lane

3. Mailing Address

15831 White Orchid Lane

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Fort Myers, FL

City & State
Fort Myers, FL

4. FEI Number

65-0980280

Applied For

Not Applicable

Zip
33908

Country
U.S.A

Zip
33908

Country
U.S.A

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BOYER, PAMELA S
11510 VILLA GRAND #424
FORT MYERS FL 33913**

7. Name and Address of New Registered Agent

Name
Boyer, Pamela S.

Street Address (P.O. Box Number is Not Acceptable)
15831 White Orchid Lane

City
Fort Myers

FL

Zip Code
33908

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 \$150.00
After May 1, 2002 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
BOYER, PAMELA S
11510 VILLA GRAND #424
FORT MYERS FL 33913** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
VESSELS, GEORGE
11510 VILLA GRAND #424
FORT MYERS FL 33913** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
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
**D
Boyer, Pamela S.
15831 White Orchid Lane
Fort Myers, FL 33908** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Vessels, George
15831 White Orchid Lane
Fort Myers, FL 33908** ☒ 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:

Pamela S. Boyer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/02 941-985-7094

CR2E034 (9/01)