

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000027454

1. Entity Name

FLORIDA'S FIRST CHOICE IN REALTY, INC.

Principal Place of Business

9300 REGENCY PARK BLVD.
PORT RICHEY FL 34668-5023

Mailing Address

9300 REGENCY PARK BLVD.
PORT RICHEY FL 34668-5023

2. Principal Place of Business

3. Mailing Address

P.O. Box 598

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

TARPON SPRINGS, FL

4. FEI Number

59-3315980

Applied For

Not Applicable

Zip

Country

34688

Country

FLORIDA

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

Name

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

City

Zip Code

COONS, CATHIE
9300 REGENCY PARK BLVD.
PORT RICHEY FL 34668-5023

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, 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 **President** ☐ Delete
NAME **Richard Gilbert**
STREET ADDRESS **1022 Land O'Lakes Blvd.**
CITY-ST-ZIP **Lutz, Florida 33549**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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
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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 Block 12 if changed, or on an attachment with an address, with all other information.

SIGNATURE:

Richard Gilbert
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb. 7, 2001

813-340-0062

FILED
May 21, 2001 8:00 am
Secretary of State

04-27-2001 90351 037 ***150.00

4031



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)