

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000028758

1. Entity Name  
THE CROSBY GROUP, INC.

**FILED**  
**Apr 12, 2001 8:00 am**  
**Secretary of State**

04-12-2001 90054 045 \*\*\*150.00

Principal Place of Business

2640 GATELY DRIVE WEST VILLA 204  
WEST PALM BEACH FL 33415

Mailing Address

2640 GATELY DRIVE WEST VILLA 204  
WEST PALM BEACH FL 33415

2. Principal Place of Business

8450 HEATHEN PL

Suite, Apt. #, etc.

3. Mailing Address

8450 HEATHEN PL

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

BOYNTON BEACH FL

City & State

BOYNTON BEACH, FL

4. FEI Number

65-0999251

Applied For

Not Applicable

Zip

33437

Country

USA

Zip

33437

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

CROSBY, BUD  
2640 GATELY DRIVE WEST VILLA 204  
WEST PALM BEACH FL 33415

Name

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

8450 HEATHEN PL

City

BOYNTON BEACH

FL

Zip Code

33437

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PSTD  
CROSBY, BUD  
2640 GATELY DRIVE WEST VILLA 204  
WEST PALM BEACH FL 33415 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
8450 HEATHEN PL  
BOYNTON BEACH, FL 33437 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VSD  
CROSBY, BUD  
2640 GATELY DRIVE WEST VILLA 204  
WEST PALM BEACH FL 33415 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
8450 HEATHEN PL  
BOYNTON BEACH, FL 33437 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

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 an other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)