

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000034084

1. Entity Name  
**INTEGRA REALTY SERVICES, INC.**

**FILED**  
**May 15, 2001 8:00 am**  
**Secretary of State**

05-15-2001 90098 022 \*\*\*150.00

Principal Place of Business Mailing Address  
~~2440 S.E. FEDERAL HWY., STE. F~~ ~~2440 S.E. FEDERAL HWY., STE. F~~  
 STUART FL 34994 STUART FL 34994

00055478

2. Principal Place of Business 3. Mailing Address  
**2430 S.E. FEDERAL HWY** **2430 S.E. FEDERAL HWY**

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State  
**STUART, FL** **STUART, FL**

Zip Country Zip Country  
**34994** **USA** **34994** **USA**

4. FEI Number Applied For  
**65-0997846** Not Applicable

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

6. Name and Address of Current Registered Agent  
**GREGG, GARY C**  
**1643 S.W. SEAGULL WAY**  
**PALM CITY FL 34990**

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 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.  
 SIGNATURE **GARY C. GREGG** *Gary C. Gregg* **5-1-01**  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) 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	PD <del>GREGG, NANCY</del> <input checked="" type="checkbox"/> Delete	TITLE	<del>PRESIDENT/DIRECTOR</del> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>GREGG, NANCY</del>	NAME	<del>GARY C. GREGG</del>
STREET ADDRESS	<del>2440 S.E. FEDERAL HWY, STE F</del>	STREET ADDRESS	<del>2430 S.E. FEDERAL HWY</del>
CITY-ST-ZIP	<del>STUART FL 34994</del>	CITY-ST-ZIP	<del>STUART, FL 34994</del>
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		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 like empowered.

SIGNATURE: **GARY C. GREGG** *Gary C. Gregg* **5-1-01** **561-221-0200**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)