

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000034501

1. Entity Name

REAL ESTATE DEVELOPMENT CONSULTANTS, INC.

FILED
Jun 30, 2002 8:00 am
Secretary of State

06-30-2002 90227 026 ***150.00

0536136 AV

B0126076



DO NOT WRITE IN THIS SPACE

Principal Place of Business 5884 NW 80 AVE RD OCALA FL 34482		Mailing Address 5884 NW 80 AVE RD OCALA FL 34482	
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-3654202		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RYDER, SANDRA S 5884 NW 80 AVE RD OCALA FL 34482		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

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 State10. 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	<input type="checkbox"/> Delete P RYDER, SANDRA S 5884 N.W. 80 AVE RD OCALA FL 34482	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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
SANDRA RYDER PRESIDENT

Date

Daytime Phone #

CR2E034 (9/01)



Attachment
Document #
P00000034501
B01B0006

Sandra S. Ryder
President

R. Stephen Ryder
Principal Consultant

6/20/02

To whom it may concern:

Please find enclosed the 2002 UBR for Real Estate Development Consultants Inc. Be advised that our accountant, who processed this report for the Corporation in 2001, was unable to submit timely due to emergency eye surgery. After contacting your office last week, I was advised to submit report ASAP under cover letter. I hope this will suffice. Please do not hesitate to contact me if you have any questions.

Sincerely,

Sandra S. Ryder