

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000034517

1. Entity Name

Tarpon House Associates, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 AUG 13 AM 9:55

Principal Place of Business

Mailing Address

3054 Industrial 31st St. 3054 Industrial 31st St.
Ft. Pierce, FL 34946 Ft. Pierce, FL 34946

2. Principal Place of Business

918 Southard Street

3. Mailing Address

918 Southard Street

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#105

#105

City & State

Key West, FL 33040

City & State

Key West, FL 33040

4. FEI Number

65-0996614

Applied For

Not Applicable

Zip
33040

Country
USA

Zip
33040

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

David M. Kesar
3054 Industrial 31st St.
Ft. Pierce, FL 34946

7. Name and Address of New Registered Agent

Name

James A. Nichols

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

918 Southard Street #105

City

Key West

FL

Zip Code

33040

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

See form, 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) ☐

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 Director ☒ Delete
NAME Byron N. Bailey
STREET ADDRESS 3054 Industrial 31st St.
CITY-ST-ZIP Ft. Pierce, FL 34946

TITLE Director ☒ Delete
NAME David M. Kesar
STREET ADDRESS 3054 Industrial 31st St.
CITY-ST-ZIP Ft. Pierce, FL 34946

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE (D) James A. Nichols ☒ Change ☐ Addition
NAME
STREET ADDRESS 918 Southard Street #105
CITY-ST-ZIP Key West, FL 33040

TITLE ☐ Change ☐ Addition
NAME 400004464914-9
STREET ADDRESS -08/22/01--01004--005
CITY-ST-ZIP *****400.00 *****400.00

TITLE ☐ Change ☐ Addition
NAME 400004464914-9
STREET ADDRESS -07/09/01--01096--014
CITY-ST-ZIP *****70.00 *****70.00

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

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)