

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 04, 2001 8:00 am
Secretary of State
 04-04-2001 90100 016 ***158.75

DOCUMENT # P00000046121

1. Entity Name

HARDEN REAL ESTATE BROKERAGE & MANAGEMENT, INC.

Principal Place of Business

4622 LEE BLVD.
 LEHIGH ACRES FL 33971

Mailing Address

4622 LEE BLVD.
 LEHIGH ACRES FL 33971

2. Principal Place of Business

8475 Pennsylvania Blvd
 Suite, Apt. #, etc.

3. Mailing Address

8475 Pennsylvania Blvd
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Fort Myers FL

City & State

Fort Myers FL

4. FEI Number

65-100 4243

Applied For

Not Applicable

Zip

33912

Country

US

Zip

33912

Country

USA

5. Certificate of Status Desired

X

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

HARDEN, MATTHEW
 1911 SNYDER DRIVE
 ALVA FL 33920

7. Name and Address of New Registered Agent

Name Matthew Harden

Street Address (P.O. Box Number is Not Acceptable)
 8475 Pennsylvania Blvd

City Fort Myers

FL

Zip Code 33912

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]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-30-01

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 D
 NAME HARDEN, MATTHEW
 STREET ADDRESS 1911 SNYDER DRIVE
 CITY-ST-ZIP ALVA FL 33920 ☐ Delete

TITLE D
 NAME HARDEN, MARK
 STREET ADDRESS 1931 CARBONATA DRIVE
 CITY-ST-ZIP ALVA FL 33920 ☒ Delete

TITLE D
 NAME PIERCE, DARRIN
 STREET ADDRESS P.O. BOX 1828
 CITY-ST-ZIP LEHIGH ACRES FL 33971 ☒ Delete

TITLE D
 NAME HARTLEY, BOBBY JR.
 STREET ADDRESS 4330 LAG AVENUE
 CITY-ST-ZIP FORT MYERS FL 33901 ☒ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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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 all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-30-01

CR2E034 (10/00)