

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 20, 2002 8:00 am
Secretary of State

05-20-2002 90128 046 ***150.00

DOCUMENT # P00000083398

1. Entity Name
I.C.R. PROPERTIES, INC.

Principal Place of Business

**8449 DUDLEY AVE
PENSACOLA FL 32514**

Mailing Address

**8449 DUDLEY AVE
PENSACOLA FL 32514**

2. Principal Place of Business

5300 CONECUH ST

3. Mailing Address

PO Box 432

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

MILTON FL

City & State

MILTON FL

4. FEI Number

59-3668900

☒ Applied For
☐ Not Applicable

Zip

Country

Zip

Country

32570

USA

32572-0432

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**DAVIS, PAUL W
302 CONECUH ST.
MILTON FL 32570**

7. Name and Address of New Registered Agent

Name **PAUL W. DAVIS**
Street Address (P.O. Box Number is Not Acceptable)
5300 CONECUH ST
City **MILTON** **FL** Zip Code **32570**

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 *Paul W. Davis President*

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

(NOTE: Registered Agent signature required when reinstating)

4/23/02
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 State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **DAVIS, PAUL W**
STREET ADDRESS **302 CONECUH ST.**
CITY-ST-ZIP **MILTON FL 32570**

TITLE **D** ☐ Delete
NAME **DAVIS, DEBORAH D**
STREET ADDRESS **302 CONECUH ST.**
CITY-ST-ZIP **MILTON FL 32570**

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** ☒ Change ☐ Addition
NAME **DAVIS PAUL W**
STREET ADDRESS **5300 CONECUH**
CITY-ST-ZIP **MILTON, FL 32570**

TITLE **D** ☒ Change ☐ Addition
NAME **DAVIS DEBORAH D**
STREET ADDRESS **5300 CONECUH ST**
CITY-ST-ZIP **MILTON FL 32570**

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

TITLE ☐ Change ☐ Addition
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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: *Paul W. Davis President* **SIGNATURE REQUIRED** *4/23/02 (850) 981-9819*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)