

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90150 032 ***150.00

DOCUMENT # P00000086417

1. Entity Name

~~COX DEVELOPMENT INC.~~

NEW NAME

PORT TAMPA COMMUNITIES, INC.

Principal Place of Business

2611 SEVILLE BLVD., STE. B
 CLEARWATER FL 33764

Mailing Address

2611 SEVILLE BLVD., STE. B
 CLEARWATER FL 33764

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3668128

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

KIRSCHNER, CHRIS

2611 SEVILLE BLVD., STE. B
 CLEARWATER FL 33764

7. Name and Address of New Registered Agent

Name

CARTER B. MCCAIN

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

400 TAMPA STR. - SUITE 2300

City

TAMPA

FL

Zip Code

33602

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

Carter B. McCain

CARTER B. MCCAIN

4/14/02

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 State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
 NAME KIRSCHNER, CHRIS
 STREET ADDRESS 2611 SEVILLE BLVD., STE. B
 CITY-ST-ZIP CLEARWATER FL 33764

TITLE VP ☐ Delete
 NAME MCCAIN, CARTER
 STREET ADDRESS 2611 SEVILLE BLVD STE B
 CITY-ST-ZIP CLEARWATER FL 33764

TITLE ST ☐ Delete
 NAME HOLDSWOTH, GREGG
 STREET ADDRESS 2611 SEVILLE BLVD STE B
 CITY-ST-ZIP CLEARWATER FL 33764

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

TITLE ☒ Change ☐ Addition
 NAME CARTER B. MCCAIN
 STREET ADDRESS 400 TAMPA STR. - SUITE 2300
 CITY-ST-ZIP TAMPA, FL. 33602

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

727-584-9516
 4-14-02

CR2E034 (9/01)