## **2003 FOR PROFIT CORPORATION**

UNIFORM	BOSINESS REPO					
DOCUMENT #	P00000099587					
APJ PINELLAS LAND	HOLDINGS, INC.					
Principal Place of Business 605 PALM BLVD.	Mailing Address PO BOX 1056					



## FILED May 01, 2003 8:00 am Secretary of State 05-01-2003 90998 011 \*\*\*150.00

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Principal Place of Business 605 PALM BLVD. DUNEDIN FL 34698		N	Mailing Address PO BOX 1056 DUNEDIN FL 34697								
			,			-					
Principal Place of Business					-						
			1721 RAIN								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State CLEARWATER			CITY & State CLEARWATER			4.	4. FEI Number 59-3713202			oplied For ot Applicable	
33755 Puellas			33755 PINELLAS		FLLAS	5.	Certificate of Status Desired		<b>\$8.75</b> Add Fee Require		
6. Name and Address of Current Registered Agent						7.	Name and Address of New F		<del></del>		
	<del></del>				Name			<u>.</u>			
VERNON	, MARCUS J			ŀ	Street Address (P.O. Box Number is Not Acceptable)						
1721 RA	Inbow Dr			Ĺ				·			
CLEARW	ATER FL 33755			j						}	
	* * * * * * * * * * * * * * * * * * *				City	**		FL	Zip Code	e	
	named entity submits ions of registered agen		purpose of changing its	registered	d office or registe	ered ag	gent, or both, in the State of Flo	orida. I am f	amiliar with,	and accept	
SIGNATURE .	Signature, typed or printed nar	ne of registered agent and title	it applicable. (NOTE	E: Registered	Agent signature requin	ed when re	einstating)	DATE			
			T				<b>J</b>				
	ILE NOW!!! FEE II r May 1, 2003 Fee w						9. Election Campaign Fire			О Мау Ве	
	Payable to Florida		te				Trust Fund Contribution	on. ∟	Added	to Fees	
10.		OFFICERS AND DIRE	CTORS	11.		AC	DDITIONS/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 11	
TITLE	PD	· .	Delete	TITLE					☐ Change	Addition	
NAME Street Address	VERNON, MARCU		NAME CIPIET ADORESS								
CITY-ST-ZIP	1721 RAINBOW D CLEARWATER FL		STREET ADDRESS CITY-ST-ZIP								
TITLE	OLEANNAILM FL	. 33733	Delete	TITLE					☐ Change	Addition	
NAME			r Delete	NAME					C Olizingo		
STREET ADDRESS				STREET	r address						
CITY-ST-ZIP				CITY-S	ST-ZIP						
TITLE -	المراجه والمصطبية بدائعهما	الم المن سجدي ال	Delete	TITLE			~		Change	☐ Addition	
NAME STORET ADDRESS				NAME	ADDRESS					}	
STREET ADDRESS CITY-ST-ZIP	•			CITY-S	TADDRESS ST-71P						
TITLE		<del></del>	Delete	TITLE	· · · · · · · · · · · · · · · · · · ·				☐ Change	Addition	
NAME			_ BCIGIO	NAME					onange		
STREET AODRESS				STREET	ADDRESS					{	
CITY-ST-ZIP				CITY-S	ST-ZIP						
TITLE			☐ Delete	TITLE					Change	☐ Addition	
NAME OTDEET ADDDESS				NAME	ADDDECC						
STREET ADDRESS CITY-ST-ZIP				CITY-S	ADDRESS ST-ZIP						
TITLE			□ Delete	TITLE	·				☐ Change	Addition	
NAME			☐ Delete	NAME					☐ ouduge	☐ Addition	
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP		<u> </u>		CITY-S	iT - ZIP				_		
12. I hereby c indicated	ertify that the information this report or supple	on supplied with this femental report is true	iling does not qualify for and accurate and that m	the exem	ption stated in S	ection same	119.07(3)(i), Florida Statutes. legal effect as if made under	I further certi	fy that the in	nformation or director	

of the corporation or the receiver of tustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: