5,

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0000101611 1. Entity Name PONCE INLET TITLE, INC. Principal Place of Business 4000 \$ ATLANTIC AVE AND S ATLANTIC AVE

SIGNATURE: =

FILED Jul 04, 2002 8:00 am Secretary of State

05-29-2002 93645 025 ****61.25 07-04-2002 90549 001 ****97.50

Mailing Address WILBUR BY THE SEA FL 2017 **Complete Formation Color STATEMENT AND S			/		
WILDING BY THE SEA FL 2027 WILDING FOR THE SEA FL 2027 DO NOT WRITE IN THIS SPACE SUITABLE FLOWING FOR SAME DO NOT WRITE IN THIS SPACE FLE IDENTIFY DO NOT WRITE IN THIS SPACE FOR Application Sea Same S	Mailing Address			00197100	
2. Perceipal Place of Busingss Suit Place + Harmon R Suit Place +	,			5012/100	
Suitably is the Service Control of Service Control	WILDON DY THE SER TE	L JEIEI	1 19811 P\$1 cir #8211 \$6111 #\$1112	### #P\$# :1814 #E4E1 (1814 #1144 e1884 (18) (18)	
SURPANDE AS SAME SURPANDE AS SAME SAME SAME AND ACCEPT OF SAME SAME SAME SAME SAME SAME SAME SAME SAME SAME SAME					
Suiling Page 1, etc. Suiling Page 1, etc. Country Suiling Page 1, etc. Suil		1 11 1		BIN QUIRI MUNI GEND WEND WIND DINGS IN DEN WEN HER	
County 23		+ Harbor			
Society Soci	111		DO NOT WRIT		
Signature		0.F Y	4. FEI Number59-367753	}	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 1. Name and Addre	Zip	Country	5. Certificate of Status Desired		
LYNCH, JOHN J III 4008 S ATLANTIC AVE WILDUR BY THE SEA FL 32127 8. The above refined entry submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Porida. SIGNATURE 9. This corporation is eligible to ability its intangible Task litting requirement and elects to do so. 9. This corporation is eligible to ability its intangible Task litting requirement and elects to do so. OFFICERS AND DIRECTORS 11. OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 INTEL WARE UNCL. 12. STORY ACRES TOTAL STAP TOTAL		021+		Fee Required	
### WILBUR BY THE SEA FL 32127 8. The above rysmed entity submits this statement for the purpose of changing its registered agent, or both, in the State of Provide. #### STATE		Name-	/. Name and Address of New R	egistered Agent	
WILDUR BY THE SEA FL 32127 8. The above named only submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Florida. SICANATURE Depart Registered agent, or both, in the State of Florida. SICANATURE Depart Registered agent, or both, in the State of Florida. 4:30-02 DATE D		Street Address	SINGLO J. Day	115	
B. The above named only submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE Comparison Security	•	55	Tible+ Hark	ar Rd	
B. The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE SECRETARY OF PROPERTY AND ACT OF THE PROPERTY APPRICATE STATEMENT APPRICATE STATEM		30	ite III		
B. The above named entry submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE SUPPLY Supply Submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE SUPPLY Supply Submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE SUPPLY Suppl			10 Tolot	FL Zio Code	
SIGNATURE	the purpose of changing its		stered agent, or both, in the State of Flo	rida	
Systams Byded or preservations to disglithest-operated with a supressive. A BUSTE Required Apent Synature required serial registration is disglible to satisfy its Intangible Tax Miling regulationent and elects to do so. After May 1, 2002 Fee will be \$550.00 Atter May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State 1.	7 0		3.	. /	
9. This corporation is elligible to satisfy its Intengible Tax Illing requirement and elects to do so. (See criteria on back) Text Illing requirement and elects to do so. (See criteria on back) Text Illing requirement and elects to do so. (See criteria on back) Text Illing requirement and elects to do so. (See criteria on back) Text Illing requirement and elects to do so. (See criteria on back) Text Illing requirement and elects to do so. (See criteria on back) Text Illing requirement and elects to do so. (See criteria on back) Text Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (See criteria on back) Tixt Illing requirement and elects to do so. (Change Addition Addition Tixt Illing requirement and elects to do so. (Change Addition Tixt Illing requirement and elects to do so. (Change Addition Tixt Illing requirement and elects to do so. (Change Addition Tixt Illing requirement and elects to do so. (Change Addition Tixt Illing requirement and	duite describe to the second			<u>4.30.02</u>	
Tax filing requirement and elects to do so. Marker May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. \$5.00 Mary Be (See criteria on back) Change Addition Change Chan			ired when reinstating)	DATE	
(See critoria on back) Make Check Payable to Department of State Trust Fund Contribution. Added to Fees	FILE NOW!!	! FEE IS \$150.00	10. Election Campaign Fina	encing \$5.00 u.s.	
THE LADRESS LIVEST-ZIP THE LADRESS STREET ADDRESS LIVEST-ZIP THE LADRESS LIVEST-ZIP THE LADREST LIVEST-ZIP THE LADREST LIV	Make Check Payabl	iz ree will be \$550.0 le to Department of S		_ ++	
MANE MANE MANE MANE MANE MANE MANE MANE	<u> </u>			CERS AND DIRECTORS IN 11	
MANNE STREET ADDRESS CTY-ST-ZIP TILE MANE STREET ADDRESS CTY-ST-ZIP TILE MANNE STREET ADDRESS CTY-ST-ZIP	. : Delete	TITLE			
MANNE SIRET ADDRESS CITY-ST-ZIP TILE MANE SIRET ADDRESS CITY-ST-ZIP	•				
MANNE STREET ADDRESS CTY-ST-ZIP TILE MANE STREET ADDRESS CTY-ST-ZIP TILE MANNE STREET ADDRESS CTY-ST-ZIP					
MANNE SIRET ADDRESS CITY-ST-ZIP TILE MANE SIRET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE		Change C Addition	
TITLE WAME STREET ADDRESS STY-ST-ZIP TITLE MAME STREET ADDRESS STY-ST-ZIP TITLE MAME STREET ADDRESS STREET ADDRESS STY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	5			C) creatific C Addition	
TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS ST	1 154 2 for 11 1	المساورة والمستورين والمستوال	er en		
MAME JREET ADDRESS JREET ADDRE			-		
STREET ADDRESS CITY-ST-ZIP CITLE AAME AAME STREET ADDRESS CITY-ST-ZIP CHange Addition AME STREET ADDRESS CITY-ST-ZIP CHange Addition AME AAME AAME STREET ADDRESS CITY-ST-ZIP CHange Addition AME STREET ADDRESS CITY-ST-ZIP CHange Addition AME STREET ADDRESS CITY-ST-ZIP CHange Addition Addition AME STREET ADDRESS CITY-ST-ZIP CHange Addition Addition AME STREET ADDRESS CITY-ST-ZIP CHANGE AME STREET ADDRESS CITY-ST-ZIP	□ pests			Change 🔲 Addition	
TITLE LAME LAME LAME LAME LAME LAME LAME LA	,	STREET ADDRESS			
AME IREET ADDRESS ITY-ST-ZIP TILE MARE MARE MARE TITLE MARE MARE MARE MARE MARE MARE MARE MAR		CITY-ST-ZIP			
IFREET ADDRESS ITY-ST-ZIP TILE MARE MAR	- Delete		-	☐ Change ☐ Addition	
TITY-SI-ZIP CITY-SI-ZIP	• '		•		
MARE REET ADDRESS TY-S1-ZIP CITY-S1-ZIP		,	` `		
REET ADDRESS TY-S1-ZIP CITY-S7-ZIP CITY-S7-ZIP CHANGE CITY-S7-ZIP CHANGE Addition Addition Addition CHANGE STREET ADDRESS CITY-S7-ZIP	☐ Delete	TITLE	<u> </u>	Change C Addition	
TY-ST-ZIP CITY-ST-ZIP TLE Delete TITLE NAME NAME STREET ADDRESS TY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP		•		□ cuanta □ vironiou	
TLE TITLE TITLE TITLE Change Addition NAME INAME STREET ADDRESS TY-ST-ZIP TITLE CHANGE CITY-ST-ZIP					
MME Change Addition NAME STREET ADDRESS IY-ST-ZIP CITY-ST-ZIP		UIT-\$1-ZIP		1	
TREET ADDRESS TTY-ST-ZIP CITY-ST-ZIP	רזג				
CHY-ST-ZIP	Delete			Change Addition	
	☐ Delete	NAME			
Y-SI-ZIP LE REET ADDRESS Y-SI-ZIP		4000 S ATLANTIC AVE WILBUR BY THE SEA FI 3. Mailing Address Suite) Apt. #, etc. City & State City & State Zip Zip Zip After May 1, 200 Make Check Payable Delete Delete Delete Delete	4000 S ATLANTIC AVE WILBUR BY THE SEA FL 32127 3. Mailing Address SUITE APIL #, etc. City & State Country Co	4000 S ATLANTIC AVE WILBUR BY THE SEA FL 32127 3. Mailing Address Suile) Apt. #, etc. City & State -PONCE-INCTIFE Country A. FEI Number 59-367753: Zip Country A. FEI Number 59-367753: Zip Country A. FEI Number 59-367753: Zip Country A. FEI Number 59-367753: Street Address (P.O. Box Number is Not Acceptable street Address (P.O. B	

Attackment BOIBTION



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

June 5, 2002

PONCE INLET TITLE, INC. 4000 S ATLANTIC AVE WILBUR BY THE SEA, FL 32127

Subject: PONCE INLET TITLE, INC.

Reference Number:

P00000101611

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report has not been filed and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$88.75.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/ns'·

ANNUAL REPORTS SECTION