

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State

05-28-2002 90703 040 ***150.00

DOCUMENT # P00000104117

1. Entity Name
BLUE DIAMOND RANCH, INC.

Principal Place of Business
2642 CHESTER AVE
NEW SMYRNA BEACH FL 32168

Mailing Address
2642 CHESTER AVE
NEW SMYRNA BEACH FL 32168

2. Principal Place of Business
1555 Cow Creek Rd
 Suite, Apt. #, etc.

3. Mailing Address
P.O. Box 730
 Suite, Apt. #, etc.

City & State
Edgewater FL
 Zip
32141
 Country
Volusia

City & State
Edgewater FL
 Zip
32132
 Country
Volusia

4. FEI Number
59-3682593

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

CROTTY, KATHLEEN L
1800 W INTERNATIONAL SPEEDWAY BLVD, BLDG 2
SUITE 201
DAYTONA BEACH FL 32114

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (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 **P** ☐ Delete
 NAME **TOMEI, LAWRENCE SR**
 STREET ADDRESS **2642 CHESTER AVE**
 CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168**

TITLE **S** ☐ Delete
 NAME **TOMEI, LIANA**
 STREET ADDRESS **2642 CHESTER AVE**
 CITY-ST-ZIP **NEW SMYRNA BEACH FL 32168**

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 ☒ Change ☐ Addition
 NAME **Tomei Lawrence JR.**
 STREET ADDRESS **155 Cow Creek Rd.**
 CITY-ST-ZIP **Edgewater FL 32141**

TITLE ☒ Change ☐ Addition
 NAME **Tomei Liana**
 STREET ADDRESS **1555 Cow Creek Rd.**
 CITY-ST-ZIP **Edgewater FL 32141**

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: Lawrence J. Tomei
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-01-02 **386**
 Date Daytime Phone # **409-9692**

CR2E034 (9/01)