

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000111285

FILED  
Apr 10, 2002 8:00 AM  
Secretary of State

Entity Name: BIG GATOR DEVELOPMENT, INC.

## Current Principal Place of Business:

1100 MAIN STREET SUITE 211  
THE VILLAGES, FL 32159

## New Principal Place of Business:

17051 S. U.S. HIGHWAY 441  
SUMMERFIELD, FL 34491 US

## Current Mailing Address:

PO BOX 1299  
THE VILLAGES, FL 32159

## New Mailing Address:

17051 S. U.S. HIGHWAY 441  
SUMMERFIELD, FL 34491 US

FEI Number: 59-3707400

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SKATES, JEFFREY P  
1100 MAIN STREET SUITE 211  
THE VILLAGES, FL 32159

## Name and Address of New Registered Agent:

SKATES, JEFFREY P  
976 DEL MAR DRIVE  
THE VILLAGES, FL 32159 US

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:

04/10/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: GRIZZARD, THOMAS D  
Address: 17051 S. US HIGHWAY 441  
City-St-Zip: SUMMERFIELD, FL 34491

Title: VSD ( ) Delete  
Name: HICKS, ROBERT F  
Address: 1034 SHORE ACRES DRIVE  
City-St-Zip: LEESBURG, FL 34748

Title: VT ( ) Delete  
Name: MOFFETT, DOUGLAS H  
Address: 9545 SILVERLAKE DRIVE  
City-St-Zip: LEESBURG, FL 34788

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS D. GRIZZARD

PD

04/10/2002

Electronic Signature of Signing Officer or Director

Date