

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 31, 2002 8:00 am
Secretary of State

03-31-2002 90346 031 ***150.00

DOCUMENT # P00000115625

1. Entity Name

SAN CARLOS PARK REALTY, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7460 SAN CARLOS BLVD. SE

3. Mailing Address

7460 SAN CARLOS BLVD. SE

Suite, Apt. #, etc.

SUITE B

Suite, Apt. #, etc.

SUITE B

City & State

FORT MYERS, FL

City & State

FORT MYERS, FL

Zip

33912

Country

Zip

33912

Country

4. FEI Number

59-3686806

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

WANDERON, THOMAS

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

868 106TH AVENUE N.

City

NAPLES

FL

Zip Code

34108

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

THOMAS WANDERON

03/12/02

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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
NAME JEROME, CARLA JO
STREET ADDRESS 7460 SAN CARLOS BLVD, SE., SUITE B
CITY-ST-ZIP FORT MYERS, FL 33912

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CITY-ST-ZIP

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IN THIS SPACE**

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 on an attachment with an address, with another like empowered.

SIGNATURE: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CARLA JO JEROME X 3-18-02 X 590-0417

CR2E034B (12/01)