

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 05, 2003 8:00 am
Secretary of State

09-05-2003 90115 026 ***558.75

DOCUMENT # P01000013180

1. Entity Name
R GEORGE INVESTMENTS, INC.



Principal Place of Business
3128 RIVER GROVE CIRCLE
FORT MYERS FL 33905

Mailing Address
3128 RIVER GROVE CIRCLE
FORT MYERS FL 33905



2. Principal Place of Business
5741 SANDPIPER PLACE
Suite, Apt. #, etc.

3. Mailing Address
5741 SANDPIPER PLACE
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
FORT MYERS FL
Zip
33919

Country
USA

City & State
FORT MYERS FL
Zip
33919

Country
USA

4. FEI Number
65-1074995

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

GEORGE, RAYMOND A
3128 RIVER GROVE CIRCLE
FORT MYERS FL 33905

Address change only

7. Name and Address of New Registered Agent

Name
Raymond A George

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

5741 SANDPIPER PLACE

City
FORT MYERS

FL

Zip Code
33919

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE:

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PVST	NAME GEORGE, RAYMOND A	<input type="checkbox"/> Delete
STREET ADDRESS	3128 RIVER GROVE CIRCLE	
CITY-ST-ZIP	FORT MYERS FL 33905	
TITLE D	NAME GEORGE, RAYMOND A	<input type="checkbox"/> Delete
STREET ADDRESS	3128 RIVER GROVE CIRCLE	
CITY-ST-ZIP	FORT MYERS FL 33905	
TITLE	NAME	<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Delete
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P	NAME George, Raymond A	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	5741 SANDPIPER PLACE	
CITY-ST-ZIP	FORT MYERS FL 33919	
TITLE V	NAME George, Raymond H	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	5741 SANDPIPER PLACE	
CITY-ST-ZIP	FORT MYERS FL 33919	
TITLE S	NAME Holmes, Robyn	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	5741 SANDPIPER PLACE	
CITY-ST-ZIP	FORT MYERS FL 33919	
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/1/3 **239-681-3216 cell**
239-466-7707 office

Date

Daytime Phone #

CR2E034 (4/03)