

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90154 032 ***150.00

DOCUMENT # P01000017613

1. Entity Name
BAGLEY LAND HOLDINGS, CORP.



Principal Place of Business
10680 TULIPTREE COURT
LEHIGH ACRES FL 33936

Mailing Address
10680 TULIPTREE COURT
LEHIGH ACRES FL 33936

2. Principal Place of Business

4850 Cedar Hammock CT

3. Mailing Address

4850 Cedar Hammock CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Ct. Myers, FL

City & State

Ct. Myers, FL

Zip

Country

33905

USA

Zip

Country

33905

USA

4. FEI Number 65-1082580

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

☒ **CHECK HERE IF MAKING CHANGES**

6. Name and Address of Current Registered Agent

BAGLEY, MARSHALL
10680 TULIPTREE COURT
LEHIGH ACRES FL 33936

7. Name and Address of New Registered Agent

Name

Bagley, Marshall

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

4850 Cedar Hammock CT.

Ct. Myers

FL

Zip Code

33905

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

Marshall C Bagley

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
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 **SCT** ☐ **Delete**
NAME **BAGLEY, MARSHALL**
STREET ADDRESS **10680 TULIPTREE CT**
CITY-ST-ZIP **LEHIGH ACRES FL 33936**

TITLE **P** ☐ **Delete**
NAME **BAGLEY, MARSHALL**
STREET ADDRESS **10680 TULIPTREE CT.**
CITY-ST-ZIP **LEHIGH ACRES FL 33936**

TITLE **V** ☐ **Delete**
NAME **BAGLEY, DAWN E**
STREET ADDRESS **10680 TULIPTREE CT**
CITY-ST-ZIP **LEHIGH ACRES FL 33936**

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Delete**
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ **Change** ☐ **Addition**
NAME
STREET ADDRESS
CITY-ST-ZIP

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TITLE ☐ **Change** ☐ **Addition**
NAME
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:

Marshall C Bagley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/03

Date

239 694 5405

Daytime Phone #

CR2E034 (10/02)