

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90153 001 ***150.00

0383349 AV

DOCUMENT # P01000030193

1. Entity Name

FRANC MARC INVESTMENTS, INC.



Principal Place of Business

**425 S SEQUOIA DR
W PALM BEACH FL 33409**

Mailing Address

**425 S SEQUOIA DR
W PALM BEACH FL 33409**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PHELPS, FRANCIS E III

425 S SEQUOIA DR

W PALM BEACH FL 33409

Name

Robert J Douville

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

425 S Sequoia Dr

City

W. Palm Beach

FL

Zip Code

33409

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

Francis Phelps III
Signature, typed or printed name of registered agent and title (Applicable)

(NOTE: Registered Agent signature required when reinstating)

Francis Phelps III

4/29/03
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Delete
NAME **PHELPS, FRANCIS E III**
STREET ADDRESS **425 S SEQUOIA DR**
CITY-ST-ZIP **W PALM BEACH FL 33409**

TITLE **President** ☐ Change ☒ Addition
NAME **Robert J. Douville**
STREET ADDRESS **425 S Sequoia Dr**
CITY-ST-ZIP **W. Palm Beach FL 33409**

TITLE **DVST** ☒ Delete
NAME **OLSHAN SMERLING, MARCIA MURIEL**
STREET ADDRESS **425 S SEQUOIA DR**
CITY-ST-ZIP **W PALM BEACH FL 33409**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Francis Phelps III
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Francis Phelps III

4/29/03
Date

Daytime Phone #

CR2E034 (10/02)