

**2002 UNIFORM BUSINESS REPORT-(UBR)**

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

03-31-2002 90346 002 \*\*\*150.00

**DOCUMENT # P01000034314**  
 1. Entity Name  
**PROCTOR PETERS DEVELOPMENT COMPANY**

Principal Place of Business <b>1401 HIGHWAY A1A #301 VERO BEACH FL 32963</b>	Mailing Address <b>1401 HIGHWAY A1A #301 VERO BEACH FL 32963</b>
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent  
**CALDWELL, WILLIAM W  
 756 BEACHLAND BOULEVARD  
 VERO BEACH FL 32963**

4. FEI Number  
**APPLIED FOR** Applied For  Not Applicable

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

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State <b>FL</b>
Zip Code

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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2002 Fee will be \$550.00**  
**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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
		<b>DIRECTOR PROCTOR, DONALD C. 1401 HIGHWAY A1A, 3RD FLOOR VERO BEACH, FL 32963</b>	
		<b>DIRECTOR PETERS, FREDERICK C. 1401 HIGHWAY A1A, 3RD FLOOR VERO BEACH, FL 32963</b>	
		<b>DIRECTOR PETERS, ERGUSON E. 1401 HIGHWAY A1A, 3RD FLOOR VERO BEACH, FL 32963</b>	
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition
			<input type="checkbox"/> Change <input type="checkbox"/> Addition

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

SIGNATURE: *[Signature]* Date 1/25/02 Days/Time Phone # 561-234-8444

CFR2E034 (9/01)