O7 for profit corporation uniform business report (UBR)

FILED

DOCUMENT # P01000035577 02 DEC -9 PM 2:55 1. Entity Name SECRETARY OF STATE TALLAHASSEE, FLORIDA Capital Realty, Inc. DO NOT WRITE IN THIS SPACE 100009417491 12/03/02--01051--004 **150.00 2. Principal Place of Business 3. Mailing Address 1914 Art Museum Drive 1914 Art Museum Drive Suite, Apt. #, etc. Suite, Apr. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Jacksonville, FL Applied For Jacksonville, FL 59-3712195 Not Applicable Zip 32207 Country USA Zip 32207 Country USA \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of Current Registered Agent Name Julie Pyburn DO NOT WRITE Street Address (P.O. Box Number is Not Acceptable) IN THIS SPACE 5090 Ortega Forest Drive City Jacksonville Zip Code 32210 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when rensusing) 9. This corporation is eligible to satisfy its Intangible January 1 - May 1 Fee is \$150.00 Tax filing requirement and elects to do so. After May 1, Fee is \$550.00 10. Election Campaign Financing \$5.00 May Be (See criteria on back) Amended UBR is \$61.25 Trust Fund Contribution Added to Fees Make Check Payable to Department of State 11, OFFICERS AND DIRECTORS TITLE P - Julie Pyburn TITLE CR2E034B (12/01) NAME NAME 5090 Ortega Forest Drive STREET ADDRESS STREET ADORESS Jacksonville, FL 32210 CITY-SI-ZIP CITY-ST-ZIP TIPLE S - Julie Pyburn THEE . NAME 5090 Ortega Forest Drive NAME STREET ADDRESS Jacksonville, FL 32210 STREET ADDRESS CITY-S1-ZiP CITY ST-ZIP TITLE THE NAME NAME SZERCOL LEEPLS STREET ADDRESS CITY-ST-ZIP DO NOT WRITE CITA-21 SIS TITLE TITLE IN THIS SPACE NAME NAME STREET ADDRESS STREET ADDRESS City-St-ZiP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7/2 CITY ST ZIP DHETITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP 13. Thereby 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 attachment with an address, with all other like empowered. SIGNATURE: FICER OR DIRECTOR

gr 12/10



CAPITAL REALTY, INC.

1914 Art Museum Drive Jacksonville, Florida 32210 (904) 813-5432

Secretary of State Division of Corporations Attn: Reinstatement Section P.O. Box 6327 Tallahassee, Florida 32314

To Whom It May Concern,

I am writing this letter in regards to reinstatement of Capital Realty, Inc. Capital Realty, Inc. (FEIN: 59-3712195) did not receive the 2002 Uniform Business Report, the first notice, or the second notice. According to your office, I am sending this notice along with a check in the amount of \$150 to reinstate the corporation. Thank you in advance.

Sincerely,

Julie Pyburn President