

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000036244

1. Entity Name

BROOK TO BAY REALTY, INC.

Principal Place of Business

1891 ENGLEWOOD ROAD
ENGLEWOOD FL 34223

Mailing Address

1891 ENGLEWOOD ROAD
ENGLEWOOD FL 34223

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

65-1102396

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KORP, WILLIAM R
333 S TAMiami TRAIL STE 199
VENICE FL 34285

7. Name and Address of New Registered Agent

Name

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

City

FL

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. 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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Delete
D	KARNIK, VINCENT	1891 ENGLEWOOD ROAD	ENGLEWOOD FL 34223	
D	GALE, JACK	1891 ENGLEWOOD ROAD	ENGLEWOOD FL 34223	
D	LUERS, JAMES	1891 ENGLEWOOD ROAD	ENGLEWOOD FL 34223	
				☐ Delete
				☐ Delete
				☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	☒ Change	☐ Addition
	Martha Chrisafulli	1891 Englewood Rd # 44	Englewood, FL 34223		Director
	Doddy Larson	1891 Englewood Rd # 164	Englewood, FL 34223		Director
	Robert Farrell	1891 Englewood Rd # 17	Englewood, FL 34223		Director
				☐ Change	☐ Addition
				☐ Change	☐ Addition
				☐ Change	☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/8/02

941-475-4892

Daytime Phone #

FILED
Jul 30, 2002 8:00 am
Secretary of State

07-16-2002 90342 006 ***550.00

39926



DO NOT WRITE IN THIS SPACE

CR2E034 (4/02)