

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
Feb 07, 2002 8:00 am  
Secretary of State

02-07-2002 90302 027 \*\*\*150.00

DOCUMENT # P01000041850

1. Entity Name  
P & C REALTY CORPORATION

Principal Place of Business

1790 APEX ROAD SUITE 100  
SARASOTA FL 34240

Mailing Address

1790 APEX ROAD SUITE 100  
SARASOTA FL 34240

2. Principal Place of Business

6222 TOWER LN

3. Mailing Address

6222 TOWER LN

Suite, Apt. #, etc.

SUITE B-6

Suite, Apt. #, etc.

SUITE B-6

City & State

SARASOTA FL

City & State

SARASOTA FL

Zip

34240

Country

USA

Zip

34240

Country

USA

4. FEI Number

65-1106494

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ORAVEC, ALAN M

2940 SOUTH TAMiami TRAIL

SARASOTA FL 34239

7. Name and Address of New Registered Agent

Name PAUL MARCHESE JR.

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

6222 TOWER LN B-6

City SARASOTA

FL

Zip Code

34240

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 *Paul Marchese Jr.*  
Signature, typed or printed name of registered agent and file if applicable

*Paul Marchese Jr. 1/22/02*  
(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 \$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

TITLE D ☐ Delete  
NAME MARCHESE, PAUL JR  
STREET ADDRESS 1790 APEX ROAD SUITE 100  
CITY-ST-ZIP SARASOTA FL 34240

TITLE D ☐ Delete  
NAME MARCHESE, CECILIA M  
STREET ADDRESS 1790 APEX ROAD SUITE 100  
CITY-ST-ZIP SARASOTA FL 34240

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME Same  
STREET ADDRESS 6222 TOWER LN B-6  
CITY-ST-ZIP SARASOTA FL 34240

TITLE ☐ Change ☐ Addition  
NAME Same  
STREET ADDRESS 6222 TOWER LN B-6  
CITY-ST-ZIP SARASOTA FL 34240

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

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

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

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

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

SIGNATURE: *Paul Marchese Jr.*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
Date 1/22/02 Daytime Phone # 941343-0000

CR2E034 (9/01)