

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 11, 2002 8:00 am
Secretary of State

06-11-2002 90394 018 ***550.00

DOCUMENT # P01000060548

1. Entity Name
EDGE REALTY OF JACKSONVILLE, INC.

Principal Place of Business
525 BEACH AVE
ATLANTIC BEACH FL 32233

Mailing Address
525 BEACH AVE
ATLANTIC BEACH FL 32233

38530



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
10769 Beach Blvd

3. Mailing Address
10769 Beach Blvd

Suite, Apt. #, etc.
12

Suite, Apt. #, etc.
12

City & State
Jacksonville, FL

City & State
Jacksonville, FL

4. FFI Number
59-3715969

Applied For
☐ Not Applicable

Zip
32240

Country
USA

Zip
32224

Country

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

6. Name and Address of Current Registered Agent

MOORE, RONALD E
525 BEACH AVE
ATLANTIC BEACH FL 32233

7. Name and Address of New Registered Agent

Name **John Mancini**

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

2245 Columbia

City **Weston**

FL Zip Code **33326**

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 **Ronald E. Moore**
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/8/02
 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 **President** ☒ Delete
 NAME **Ron Moore**
 STREET ADDRESS **525 Beach Avenue**
 CITY-ST-ZIP **Atlantic Beach, FL 32233**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 2002

TITLE **President** ☒ Change ☐ Addition
 NAME **John Mancini**
 STREET ADDRESS **2245 Columbia**
 CITY-ST-ZIP **Weston, FL 33326**

TITLE **Vice President/Treasurer** ☐ Change ☒ Addition
 NAME **Tina Deegan**
 STREET ADDRESS **3709 Planters Creek Circle West**
 CITY-ST-ZIP **Jacksonville, FL 32224**

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)(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: **John Mancini, President** **7/8/02 954-389-9171**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/02)

Attachment # PO1000060548
38530

You already
received check
you needed
updated information
on the business
& officers.

Tina
904462-5000