

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2002 8:00 am
Secretary of State

03-13-2002 90069 025 ***150.00

0087202 AV

DOCUMENT # P01000062361

1. Entity Name

CONTINENTAL INVESTMENT PROPERTIES, INC.

Principal Place of Business

Mailing Address

~~300 GARFIELD AVENUE~~
~~3RD FLOOR~~
 WINTER PARK FL 32789

~~300 GARFIELD AVENUE~~
~~3RD FLOOR~~
 WINTER PARK FL 32789

2. Principal Place of Business

3. Mailing Address

250 Park Ave S.

250 Park Ave S.

Suite, Apt. #, etc.
Suite 635

Suite, Apt. #, etc.
Suite 635

City & State
Winter Park, FL

City & State
Winter Park, FL

Zip
32789

Country
USA

Zip
32789

Country
USA

4. FEI Number

01-0582582

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CAMPBELL, SEAN P
~~300 GARFIELD AVENUE~~
~~3RD FLOOR~~
 WINTER PARK FL 32789

Name

CAMPBELL, SEAN P.

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

250 Park Ave S.

Suite 635

City

Winter Park

FL

Zip Code

32789

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:

[Signature]

SEAN P. CAMPBELL

02/07/02

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 \$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 ☐ Delete
 NAME **D**
 STREET ADDRESS **CAMPBELL, SEAN P**
 CITY-ST-ZIP **~~300 GARFIELD AVENUE, 3RD FLOOR~~**
WINTER PARK FL 32789

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **CAMPBELL, SEAN P.**
 CITY-ST-ZIP **250 Park Ave S., Ste 635**
Winter Park, FL 32789

TITLE ☐ Delete
 NAME **D**
 STREET ADDRESS **ORTIZ, ANDY**
 CITY-ST-ZIP **~~300 GARFIELD AVENUE, 3RD FLOOR~~**
WINTER PARK FL 32789

TITLE ☒ Change ☐ Addition
 NAME **D**
 STREET ADDRESS **ORTIZ, ANDY**
 CITY-ST-ZIP **250 Park Ave S., Ste 635**
Winter Park, FL 32789

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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TITLE ☐ Delete
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 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:

[Signature] **SEAN P. CAMPBELL**

2/7/02

407 622 5170

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CFR2034 (9/01)