

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 16, 2003 8:00 am**  
**Secretary of State**

04-16-2003 90107 027 \*\*\*150.00

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DOCUMENT # P01000073307

1. Entity Name  
FERNLEIGH CORP.



Principal Place of Business  
P.O. BOX 4878  
SEASIDE FL 32459

Mailing Address  
P.O. BOX 4878  
SEASIDE FL 32459



2. Principal Place of Business

22118 BELGRADE AVE

3. Mailing Address

22118 BELGRADE AVE

Suite, Apt. #, etc.

Panama City

Suite, Apt. #, etc.

Panama City

City & State

FL.

City & State

FLORIDA

Zip

32413

Country

Bay

Zip

32413

Country

usa

☒ CHECK HERE IF MAKING CHANGES  
EIN 91-214110

4. FEI Number APPLIED FOR

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

BECK, MARGARET  
10 HOLL BLDG., CENTRAL SQUARE  
SEASIDE FL 32459

7. Name and Address of New Registered Agent

Name Beck, Margaret m.  
Street Address (P.O. Box Number is Not Acceptable)  
22118 Belgrade Ave  
Panama City Beach  
City Florida FL Zip Code 32413

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 Margaret M. Beck

4-12-2003

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	BECK, MARGARET	
STREET ADDRESS	22118 BELGRADE AVE	
CITY-ST-ZIP	PALM BEACH FL 32413	
TITLE	D	<input type="checkbox"/> Delete
NAME	WHITHEAD, BERT	
STREET ADDRESS	22118 BELGRADE AVE	
CITY-ST-ZIP	PALM BEACH FL 32413	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Beck, Margaret	
STREET ADDRESS	22118 Belgrade Ave	
CITY-ST-ZIP	Panama City Beach FL 32413	
TITLE	WHITBREAD, BERT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	22118 BELGRADE AVE	
STREET ADDRESS	PCB, FL 32413	
CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Margaret M. Beck

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-12-2003 850-249-5535

CR2E034 (10/02)