FILED

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0100090545			02 NOV 18 PM 3: 09	
FALCON TRACE/HUNTERS CREEK REAL ESTATE, INC.				SECHETARY OF STATE TALLAHASSEE, FLORIDA
Principal Place of Business 4125-TOWN-GENFER-BLVD ORLANDO FL 32837	Mailing Address 4125 TOWN-GENTER BLVD ORLANDO FL 32837			
2. Principal Place of Business / 133 Tylenorade D Suite, Apt. #, etc.	3. Mailing Address 1933 Tolon rodo Da Suite, Apt. #, etc.		1000	DO NOT WRITE IN THIS SPACE
City & State Of Condo	City & State			4. FEI Number Applied For Not Applied For Not Applicable
Country Cou	-336-37	Country		5. Certificate of Status Desired S8.75 Additional Fee Regulred
KAISER, MARTIN 4125 TOWN CENTER BLVD ORLANDO FL 32837	egistered Agent	Street City		7. Name and Address of New Registered Agent O. Box Number is Not Acceptable)
8. The above named entity submits this statement for the	ne purpose of changing its reg	1 .	registered	d agent, or both, in the State of Florida
SIGNATURE Supplied, hypocod primers white of registered agent and side if applicable. (NOTE: Registered Agent signature required when reinstaing) DATE DATE				
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)	FILE NOW!!! F After May 1, 2002 F Make Check Payable to	ee will be \$5	50.00	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees
11. OFFICERS AND DIF	RECTORS Delete	TILE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11
NAME STREET ADDRESS CITY-ST-ZIP CREANDO FL 32837 KAISER, MARTIN 4125 TOWN-GENTER BLVD ORLANDO FL 32837		NAME STREET ADORESS CITY-ST-ZIP	1423.	Change Addition 33 I slamounda D (I and a FC 38537
NAME STREET ADDRESS CITY-ST-ZIP OPI ANTO C: 2027		TITLE NAME STREET ADDRESS	1473	33 Islamorada Na
CITY-ST-ZIP ORLANDO FL 32837 TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Deleto	CITY-ST-ZIP TITLE FLAME STREET ADDRESS CITY-ST-ZIP		Orlando Fr. 39637
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S	TITLE NAME STREET ADDRESS CITY-ST-ZIP		R N (8
NAME STREET ADDRESS CITY-ST-ZIP	, s	TTLE IAME TREET ADDRESS ITY-ST-ZIP		☐ Change ☐ Addition
TITLE MAME STREET ADDRESS CITY-ST-2!P-	N/ ST . C;	TILE AME TREET ADDRESS TY-ST-ZIP		☐ 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)(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 trustag empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if				
SIGNATURE: 11 TO DE QUIRED 1/16/22 1/07/55772573				

November 15, 2002

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, Fla. 32314

Dear Mr. Toner:

Re: Ref Number P1000090545

I have attempted to comply with your departments various requests on 3-4 occasions. I believe my only paperwork error initially was that I left out item #4, FEI number, which I have subsequently applied for. On the first two occasions, my paperwork was sent in prior to the deadline your department has stated.

I believe I have done everything I could do to satisfy your requirements and would ask that you again review my paperwork. However, if you hold to the position stated in your November 8, 02 correspondence, I can not afford for a non-revenue generating corp. at Present, to send in the exhorbitant fees you are requesting. Consequently, if that is your final position, please return my check of \$150.00.

Your cooperation is appreciated. I can also be reached at 407-857-7253(Ext.12).

Sincerely,

Martin S. Kaiser

14233 Islamorada Drive

Orlando, Fla. 32837