

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 21, 2003 8:00 am**  
**Secretary of State**

07-21-2003 90124 024 \*\*\*150.00

**DOCUMENT # P02000028708**

**1. Entity Name**  
**OFFUTT PROPERTIES, INC.**



**Principal Place of Business**  
**118 MIDWAY ISLAND**  
**CLEAWATER FL 33767**

**Mailing Address**  
**118 MIDWAY ISLAND**  
**CLEAWATER FL 33767**

**2. Principal Place of Business**

**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

**4. FEI Number**

**04-3637160**

Applied For

Not Applicable

**5. Certificate of Status Desired**

☐

**\$8.75 Additional  
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**GIBBONS, GARY A**  
**3321 HENDERSON BLVD.**  
**TAMPA FL 33609**

**7. Name and Address of New Registered Agent**

**Name** **OFFUTT, Ronald P.**  
**Street Address (P.O. Box Number is Not Acceptable)**  
**118 Midway Island**  
**City** **Clearwater** **FL** **Zip Code** **33767**

**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**

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

(NOTE: Registered Agent signature required when reinstating)

**DATE**

**7-16-03**

**FILE NOW!!! FEE IS \$550.00**

**After September 10, 2003 Fee will be \$750.00**  
**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** ☐ Delete  
**NAME** **OFFUTT, RONALD P**  
**STREET ADDRESS** **118 MIDWAY ISLAND**  
**CITY-ST-ZIP** **CLEAWATER FL 33767**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
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**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ Delete  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

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

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

**TITLE** ☐ Change ☐ Addition  
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**CITY-ST-ZIP**

**TITLE** ☐ Change ☐ 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:**

**RONALD P. OFFUTT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**7-16-03**

Date

**(813) 621-8902**

Daytime Phone #

CR2E034 (4/03)

Attachment

90145027  
#P02000028708

**OFFUTT PROPERTIES  
118 MIDWAY ISLAND  
CLEARWATER, FL 33767**

July 16, 2003

Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500  
Attn: Corporations Officer or Director,

I am requesting that the late fee on my Uniform Business Report be waived as I just received the report in this morning's mail, July 16, 2003. I have enclosed my check for \$150.00 for the filing fee.

Thank you for your time and assistance.

Sincerely,

Ronald P. Offutt

