

FILED  
Jun 13, 2003 8:00 am  
Secretary of State

04-24-2003 90232 041 \*\*\*150.00

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P02000075127

1. Entity Name  
SG REAL ESTATE, INC.



Principal Place of Business  
1415 DEAN STREET  
SUITE 108  
FORT MYERS FL 33901

Mailing Address 17888  
1415 DEAN STREET  
SUITE 108  
FORT MYERS FL 33901  
COURTSIDE  
LANDING CIR  
PUNTA GORDA FL 33955

55048126

2. Principal Place of Business

3. Mailing Address  
17888 COURTSIDE LDR CR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

City & State  
PUNTA GORDA FL

4. FEJ Number

41-2059570

Applied For

Not Applicable

Zip

Country

Zip

Country

33955

LEE

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GIBBONEY, STEVEN C  
17888 COURTSIDE LANDING CIRCLE  
PUNTA GORDA FL 33955

Name

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

City

FL

Zip Code

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

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
GIBBONEY, STEVEN C  
17888 COURTSIDE LANDING CIRCLE  
PUNTA GORDA FL 33955 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Change ☐ Addition

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:

RECEIVED REQUIRES STEVE GIBBONEY 4/15/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (10/02)