

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90142 021 ***158.75

DOCUMENT # P02000075236

1. Entity Name

CLARION INVESTORS GROUP, INC.



Principal Place of Business
**200 E LAS OLAS BLVD. STE 1600
FT LAUDERDALE FL 33301**

Mailing Address
**200 E LAS OLAS BLVD. STE 1600
FT LAUDERDALE FL 33301**

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

06-1638442

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

**ELKIN, STEVEN C ESQ.
FRANK, WEINBERG & BLACK, P.L.
7805 SW 6 CT
PLANTATION FL 33324**

7. Name and Address of New Registered Agent

Name

J. ROBERT DAY

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

200 E LAS OLAS, SUITE 1660

City

FORT LAUDERDALE FL

Zip Code

33301

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

J. ROBERT DAY

4/14/03

(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

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

P
DAVID G. SPIERS
200 E LAS OLAS #1660
FORT LAUDERDALE FL 33301

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

N
RAYMOND FONTAINE
200 E LAS OLAS #1660
FORT LAUDERDALE FL 33301

☐ Change

☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP

ST
J. ROBERT DAY
200 E LAS OLAS
FORT LAUDERDALE FL 33301

☐ 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:

J. ROBERT DAY
SECRETARY

4/14/03

954-527-5085

(Signature and typed or printed name of signing officer or director)

Date

Daytime Phone #

CR2E034 (10/02)