

FILED
Jun 09, 2003 8:00 am
Secretary of State

05-08-2003 90172 004 ***150.00

2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000101889					
1. Entity Name ONCORE PROPERTIES, INC.					
Principal Place of Business 533 LAFITTE ROAD LITTLE TORCH KEY, FL 33042 US			Mailing Address 533 LAFITTE ROAD LITTLE TORCH KEY, FL 33042 US		
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 52-2379471				Applied For Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent CONTE, ANTONY 533 LAFITTE ROAD LITTLE TORCH KEY, FL 33042			7. Name and Address of New Registered Agent		
Name			Name		
Street Address (P.O. Box Number is Not Acceptable)			Street Address (P.O. Box Number is Not Acceptable)		
City			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 _____ DATE _____					
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			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
P CONTE, ANTONY 533 LAFITTE ROAD LITTLE TORCH KEY, FL 33042			P CONTE, ANTONY 533 LAFITTE ROAD LITTLE TORCH KEY, FL 33042		
D CONTE, ANTONY 533 LAFITTE ROAD LITTLE TORCH KEY, FL 33042			D CONTE, ANTONY 533 LAFITTE ROAD LITTLE TORCH KEY, FL 33042		
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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 807, 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: <i>Anthony Conte</i> 4/30/03 3058724105					

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CR2E034 (10/02)