

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2003 8:00 am
Secretary of State

04-24-2003 90263 003 ***150.00

DOCUMENT # P02000105242

1. Entity Name
TRI-STRAND INVESTMENT, INC.



Principal Place of Business
**2180 EVERLY AVENUE SW
NAPLES FL 34117**

Mailing Address
**2180 EVERLY AVENUE SW
NAPLES FL 34117**

11015100



2. Principal Place of Business
107 14th Avenue N.E.

3. Mailing Address
107 14th Avenue N.E.

City & State

Naples, FL

Suite, Apt. #, etc.

Naples, FL

4. FEI Number
57-1137996

Applied For
Not Applicable

Zip
34120

Country
U.S.A.

Zip
34120

Country
U.S.A.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**DAVIS, JILL R
2180 EVERLY AVENUE SW
NAPLES FL 34117**

7. Name and Address of New Registered Agent

Name
Jill R. Davis
Street Address (P.O. Box Number is Not Acceptable)
107 14th Avenue N.E.
City
Naples FL Zip Code
34120

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 *Jill R. Davis*

(NOTE: Registered Agent signature required when reinstating)

DATE

2/7/03

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
**PTD
DAVIS, JILL R
2240 EVERLY AVENUE S.W.
NAPLES FL 34117** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVD
DAVIS, LARRY R
2240 EVERLY AVENUE S.W.
NAPLES FL 34117** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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☐ 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: *Jill R. Davis*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/7/03
Date Daytime Phone #

CR2E034 (10/02)