

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 07, 2003 8:00 am
Secretary of State

01-07-2003 90024 041 ***163.75

DOCUMENT # P02000117529

1. Entity Name

TRI-COUNTY REAL PROPERTIES, INC.



Principal Place of Business

9763 NORTH GRAND DUKE CIRCLE
TAMARAC FL 33321

Mailing Address

9763 NORTH GRAND DUKE CIRCLE
TAMARAC FL 33321



2. Principal Place of Business

5010 Lighthouse Circle

3. Mailing Address

5010 Lighthouse Circle

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Unit P.

Unit P.

City & State

City & State

Coconut Creek, FL

Coconut Creek, FL

Zip

Country

Zip

Country

33063 USA

33063

USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

14-1860046

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ZUROMS, DAVID

9763 NORTH GRAND DUKE CIRCLE

TAMARAC FL 33321

7. Name and Address of New Registered Agent

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

David J. Zuroms (President)

(NOTE: Registered Agent signature required when registering)

1/4/03

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZUROMS, DAVID 9763 NORTH GRAND DUKE CIRCLE TAMARAC FL 33321	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	David Zuroms P. 5010 Lighthouse Circle, P Coconut Creek, FL 33063	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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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 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:

David J. Zuroms

1/4/03

(84) 579-1568

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)