

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90399 012 ***150.00

DOCUMENT # P03000066257

1. Entity Name

SQUARE FOREST INC



Principal Place of Business

**301 YAMATO ROAD
SUITE 1240 A
BOCA RATON FL 33431**

Mailing Address

**301 YAMATO ROAD
SUITE 1240 A
BOCA RATON FL 33431**

2. Principal Place of Business

6500 West Rogers Circle

Suite, Apt. #, etc.

Suite 6000

City & State

Boca Raton, FL

Zip

33487

Country

USA

3. Mailing Address

6500 West Rogers Circle

Suite, Apt. #, etc.

Suite 6000

City & State

Boca Raton, FL

Zip

33487

Country

USA



MOORE

CR2E034 (11/03)

4. FEI Number

20-0150873

Applied For

☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TAYLOR, DAVID W
301 YAMATO ROAD
SUITE 1240 A
BOCA RATON FL 33431**

7. Name and Address of New Registered Agent

Name **Taylor, David W**

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

6500 W Rogers Circle, Suite 6000

City **Boca Raton**

FL

Zip Code **33487**

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 W. Taylor

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/19/04

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 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 **P** ☐ Delete
NAME **TAYLOR, DAVID W**
STREET ADDRESS **301 YAMATO ROAD, SUITE 1240 A**
CITY-ST-ZIP **BOCA RATON FL 33431**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **Taylor, David W**
STREET ADDRESS **6500 West Rogers Circle, Suite 6000**
CITY-ST-ZIP **Boca Raton, FL 33487**

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

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

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

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

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/19/04

Date

561-982-8852

Daytime Phone #