

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2002 8:00 am
Secretary of State

05-14-2002 90357 046 ***158.75

DOCUMENT # P31581

1. Entity Name
ARBOR PROPERTIES DEVELOPMENT, INC.

Principal Place of Business
**2750 OLD ST. AUGUSTINE RD.
 TALLAHASSEE FL 32301**

Mailing Address
**2750 OLD ST. AUGUSTINE RD.
 TALLAHASSEE FL 32301**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **63-1027963**

Applied For
 Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

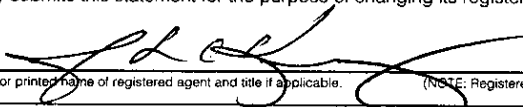
**BOOTH, ED ESQ
 BOEHM, BROWN, RIGDON, SEACREST, FISCHER
 522 EAST PARK AVE
 TALLAHASSEE FL 32302**

Name **John Kenny, Esq.**

Street Address (P.O. Box Number is Not Acceptable)
241 EAST 6th Ave.

City **Tallahassee** FL Zip Code **32303**

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.

SIGNATURE 

DATE **4/30/02**

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME	C	<input type="checkbox"/> Delete
STREET ADDRESS	THAMES, WILLIAM G. SR. 2495 MEADOW RIDGE LANE MONTGOMERY AL 36117	
TITLE NAME	PDS	<input type="checkbox"/> Delete
STREET ADDRESS	THAMES, WILLIAM G. JR. 2750 OLD ST. AUGUSTINE RD. TALLAHASSEE FL 32301	
TITLE NAME		<input type="checkbox"/> Delete
STREET ADDRESS		
TITLE NAME		<input type="checkbox"/> Delete
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TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **WILLIAM G. THAMES, JR.** DATE **4/30/02** DAYTIME PHONE # **850-656-7667**

UNIFORM BUSINESS REPORT

CR2E034 (9/01)