

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 18, 2003 8:00 am
Secretary of State

07-18-2003 90079 004 ***150.00

DOCUMENT # P92000011913

1. Entity Name

KEY PROPERTIES OF SARASOTA, INC.



Principal Place of Business

**ST. ARMANDS CIRCLE
355 MONROE DR. SUITE #2
SARASOTA FL 34236
US**

Mailing Address

**C/O ANTOINETTE JONES
3609 GARDEN LAKES IVY
BRADENTON FL 34203
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

65-0374057

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**JONES, MAHLON H
3609 GARDEN LAKES IVY
BRADENTON FL 34203**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00

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 **D** ☐ Delete
NAME **JONES, ANTOINETTE M**
STREET ADDRESS **3609 GARDEN LAKES IVY**
CITY-ST-ZIP **BRADENTON FL 34203**

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

TITLE **PD** ☐ Delete
NAME **JONES, MAHLON H**
STREET ADDRESS **3609 GARDEN LAKES IVY**
CITY-ST-ZIP **BRADENTON FL 34203**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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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 another like empowered.

SIGNATURE:

WILLIAM J. RICHARDS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-15-03 (941) 388-1921

Date

Daytime Phone #

CR2E034 (4/03)

Attachment #

7-15-03

90144648
Pg 200.001913

TO: FLORIDA DEPT. OF STATE
DIVISION OF CORPS.
P.O. Box 6327
TALLAHASSEE, FL 32314

FROM: KEY PROPS. OF SARASOTA, INC.
C/O ANTOINETTE JONES
3609 GARDEN LAKES IVY
BRADENTON, FL 34203
(941) 388-1921
FAX #: (941) 739-8790

THIS LETTER IS TO INFORM YOUR DEPARTMENT THAT
WE DID NOT RECEIVE A PRIOR NOTICE.

WE HAVE BEEN IN BUSINESS SINCE 1992 AND
THIS IS THE FIRST TIME THIS HAS HAPPENED THAT
WE DID NOT RECEIVE A FIRST NOTICE.

AS PER YOUR PHONE INSTRUCTIONS, WE ARE
ENCLOSING OUR CHECK IN THE AMOUNT OF
\$150.00.

SINCERELY,

Antoinette Jones