

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P93000005032**

1. Entity Name

PREFERRED PROPERTIES OF GAINESVILLE, INC.**FILED**
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90150 004 ***150.00

Principal Place of Business

**4061 NW 43 ST.
SUITE 16
GAINESVILLE FL 32606**

Mailing Address

**4061 NW 43 ST.
SUITE 16
GAINESVILLE FL 32606**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-3163673**

Applied For

Not Applicable

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

**IVEY, RAYMOND M P.A.
2632 N.W. 43RD ST. A102
GAINESVILLE FL 32606**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. 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	STREET ADDRESS	CITY-ST-ZIP	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
	DPVS		<input type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	MOTT, BONNIE	11503 PALMETTO BLVD, 221 TURKEY CREET	ALACHUA FL 32615				
	VP		<input checked="" type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	YRAUSQUIN, PRISCILLA	4634 NW 30TH AVE	GAINESVILLE FL 32606				
	VP		<input checked="" type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	MCGEE, HAROLD	4620 NW 32ND PLACE	GAINESVILLE FL 32606				
	VP		<input checked="" type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	JOHNSON, GERALD S	303 SW 170TH ST	NEWBERRY FL 32269				
	VP		<input checked="" type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	PISANO, RUSSELL L JR.	1122 NW 22ND ST.	GAINESVILLE FL 32603				
	V		<input checked="" type="checkbox"/> Delete				<input type="checkbox"/> Change <input type="checkbox"/> Addition
	BURNETTE, JANE	2808 NW 34TH ST	GAINESVILLE FL 32605				

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: *Bonnie H. Mott*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/00

Date

352 373-3132

Daytime Phone #

CR2E034 (10/00)