

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90168 004 ***150.00

DOCUMENT # **P 930000 45 880**

1. Entity Name

PINE STREET PROPERTIES, INC.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1928 BRANTLEY CIRCLE

Suite, Apt. #, etc.

3. Mailing Address

1928 BRANTLEY CIRCLE

Suite, Apt. #, etc.

656597

DO NOT WRITE IN THIS SPACE

City & State

CLERMONT FLORIDA

City & State

CLERMONT, FLORIDA

4. FEI Number

59-3193109

Applied For

Not Applicable

Zip

34711

Country

USA

Zip

34711

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

BYRON N. CARTER

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

1928 BRANTLEY CIRCLE

City **CLERMONT**

FL

Zip Code **34711**

**DO NOT WRITE
IN THIS SPACE**

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

Byron N. Carter

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

(NOTE: Registered Agent signature required when renouncing)

4/25/02

DATE

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

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**PRESIDENT
BYRON N. CARTER
1928 BRANTLEY CIRCLE
CLERMONT, FL. 34711**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered,

SIGNATURE:

Byron N. Carter

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/02 407-245-0988

Date

Daytime Phone #

CR2ED348 (12/01)