

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000028443

1. Entity Name

ABLE PROPERTY INVESTMENTS, INC.

FILED
Apr 28, 2001 8:00 am
Secretary of State

04-28-2001 90054 038 ***185.00

0617760

Principal Place of Business

6348 COTTONWOOD LANE
APOLLO BEACH FL 33572
US

Mailing Address

PO BOX 3367
APOLLO BEACH FL 33572
US

900014

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 **59-3270903**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, PAUL B ESQ
100 S ASHLEY DR
SUITE 1450
TAMPA FL 33602

7. Name and Address of New Registered Agent

Name
GARY A. GIBBONS, ESQ.
Street Address (P.O. Box Number is Not Acceptable)
3321 Henderson Blvd.
City
Tampa **FL** Zip Code
33609

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 *Gary A. Gibbons*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4-21-01

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 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	PD MESSMAN, MICHAEL 6348 COTTONWOOD LANE APOLLO BEACH FL 33572	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD MESSMAN, LYNDIA R 6348 COTTONWOOD LANE APOLLO BEACH FL 33572	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MCMORRIS, MELISSA 4961 10TH AVE N ST. PETERSBURG FL 33710	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MESSMAN, STUART 6348 COTTONWOOD LANE APOLLO BEACH FL 33572	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael D Messman Pres

Date

Daytime Phone #

4-21-01 B13 340634

CR2E034 (10/00)

Attachment
960874

P94000028443

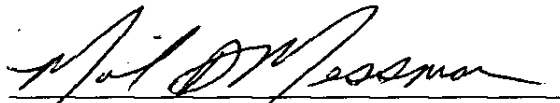
**STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT OR BOTH FOR CORPORATIONS**

Pursuant to the provisions of F.S. 607.0502 or 607.1508, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: Able Property Investments, Inc.
2. The mailing address of the corporation is: 6348 Cottonwood Lane, Apollo Beach, FL 33572.
3. Date of incorporation/qualification: April 12, 1994.
Document number: P94000028443
4. The name and address of the current Registered Agent and office:
Paul B. Johnson
100 South Ashley Drive, Suite 1450
Tampa, FL 336002
5. The name and address of the new Registered Agent and office:
Gary A. Gibbons, Esquire
3321 Henderson Boulevard
Tampa, FL 33609

The street address of its registered office and the street address of the business office of its Registered Agent, as changed, will be identical.

Such change was authorized by resolution duly adopted by its Board of Directors or by an officer so authorized by the Board.



Michael Messman, President

Dated: 4/2/01

Having been named as Registered Agent and to accept service of process for the above-stated corporation at the place designated in this certificate, I hereby accept the appointment as Registered Agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



Gary A. Gibbons, Esquire

Dated: 4/2/01