2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000032548 1. Entity Name BLUE HERON REALTY, INC.				FILED Jan 29, 2000 8:00 am Secretary of State 01-29-2000 90029 050 ***150.00		
Principal Place	e of Business	Mailing Address		01-29-2000 9	3029 030 *** 130.0	.0
4100 CORPORATE SO STE 157 NAPLES FL 34104 US		4100 CORPORATE SO STE157 NAPLES FL 34104-4704 US			YUK BBUU BBUBB KKIB KIBB! BUKU	61661 1811 1861
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		DO NOT WE	RITE IN THIS SPACE	•
City & State		City & State		4. FEI Number 65-04874	<u> j</u>	Applied For Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired	Fee Requi	
	6. Name and Address of Current R	egistered Agent	Name	-7. Name and Address of New	Hegistered Agent	
4100 STE	SIN, WILLIAM T JR) CORPORATE SQ 157 LES FL 34104			6 (P.O. Box Number is Not Acceptab	FL Zip Co	 _ ode
	named entity submits this statement for t				<u> </u>	
Tax filing r	Signature, typed or printed name of registered agent and praction is eligible to satisfy its Intangible equirement and elects to do so.	FILE NOW!!! After MAY 1, 200	Registered Agent signature require FEE IS \$150.00 Fee will be \$550.00 The to Department of Signature is signature.	10. Election Campaign F Trust Fund Contribut	ion. 🗆 Add	. 00 May Be ed to Fees
11.	OFFICERS AND D	IRECTORS	12.	ADDITIONS/CHANGES TO O	FICERS AND DIRECTO	RS IN 11
TITLE NAMÈ STREET ADORESS CITY-ST-ZIP	P DALSIN, WILLIAM T. J 4100 CORPORATE SQ STE 157 NAPLES FL 34104	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	e 🔲 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	•	☐ Change	e
NAME STREET ADDRESS CITY-ST-ZIP		Delete 2	TITLE NAME STREET ADDRESS CITY-ST-ZIP	. * a =	Change	g*s** [∏*Addinidon
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP		☐ Change	e 🗌 Addition
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indicated of the cor	pertify that the information supplied with to on this report or supplemental report is to poration or the receiver or trustee empoyor or on an attachment with an address, wi	rue and accurate and that my vered to execute this report a	∡ signature shall have thi	e same legal ettect as it mage unge	er oath: that I am an offic	er or alrector

01-25-00

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: