

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90092 031 ***150.00

DOCUMENT # P94000052799

1. Entity Name

VINTAGE BAY DEVELOPMENT CORPORATION



Principal Place of Business

1400 GULFSHORE BLVD. STE. 223
NAPLES FL 34102

Mailing Address

1400 GULFSHORE BLVD. STE. 223
NAPLES FL 34102

2. Principal Place of Business

800 Harbour Dr.

3. Mailing Address

800 Harbour Dr.

Suite, Apt. #, etc.

#3

Suite, Apt. #, etc.

#3

City & State

Naples FL

City & State

Naples FL

Zip

34103

Country

USA

Zip

34103

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number

65-0513879

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BARON, AVI

1400 GULFSHORE BLVD NORTH, SUITE 223

NAPLES FL 34102

7. Name and Address of New Registered Agent

Name

JOHN PAULICH

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

801 Anchor Road Dr #203

City

Naples

FL

Zip Code

34102

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

1-29-03

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

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

TITLE **D** ☐ Delete
NAME **BARON, AVI**
STREET ADDRESS **1400 GULFSHORE BLVD. STE. 223**
CITY-ST-ZIP **800 Harbour Dr #3**
NAPLES FL 34102-34103

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **address only** ☒ Change ☐ Addition
NAME
STREET ADDRESS **800 Harbour Dr. #3**
CITY-ST-ZIP **Naples FL 34103**

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

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

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TITLE ☐ Change ☐ Addition
NAME
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 all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

AVI BARDON

1-27-03

239-261-7117

Date

Daytime Phone #

CR2E034 (10/02)