

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 28, 2002 8:00 am**  
**Secretary of State**

03-28-2002 90178 022 \*\*\*150.00

**DOCUMENT # P94000066110**

**1. Entity Name**  
**REGENT REALTY CORP.**

**Principal Place of Business**      **Mailing Address**  
**6245 10TH AVE N.E**      **6245 10TH AVE N.E**  
**NAPLES FL 34119**      **NAPLES FL 34119**

**2. Principal Place of Business**      **3. Mailing Address**

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country

DO NOT WRITE IN THIS SPACE

**4. FEI Number** **65-0573517**      **Applied For**  
~~65-0307329~~      **Not Applicable**

**5. Certificate of Status Desired** ☐ **\$8.75 Additional Fee Required**

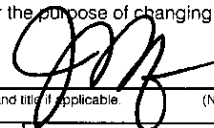
**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**LAMB, JEFFREY**  
**9915 TAMiami-TR N**  
**SUITE #2**  
**NAPLES FL 34108**

**Name** **JEFFREY R. LAMB**  
**Street Address (P.O. Box Number is Not Acceptable)**  
**668 106TH AVE NORTH**  
**City** **NAPLES**      **FL**      **Zip Code** **34108**

**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**  **JEFFREY R. LAMB**      **3-9-2002**  
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, 2002 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**

**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

**TITLE** **PD** ☐ **Delete**  
**NAME** **POWELL, VIRGINIA**  
**STREET ADDRESS** **6245 10TH AVE N.W.**  
**CITY-ST-ZIP** **NAPLES FL 34119**

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

**TITLE** ☐ **Delete**  
**NAME**  
**STREET ADDRESS**  
**CITY-ST-ZIP**

**TITLE** ☐ **Change** ☐ **Addition**  
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**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**

**3-15-02**      **941-597-5706**  
Date Daytime Phone #

CR2E034 (9/01)

ATTACHMENT DOC#: P94 0000 66110

349980

Note to State:

Not sure when FEI #  
was given to you as  
65-0307328 however  
the above is the  
correct # used on  
1120 tax returns.

Jeff Lamb E.A.