

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000084627

1. Entity Name

FMSA REALTY, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90240 037 ***150.00

Principal Place of Business

1166 W NEWPORT CENTER DRIVE
#114
DEERFIELD BEACH FL 33442
US

Mailing Address

1166 W NEWPORT CENTER DRIVE
#114
DEERFIELD BEACH FL 33442
US

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 65-0583988

Applied For
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

YOUNG, JAMES
1166 W NEWPORT CENTER DRIVE
SUITE #114
DEERFIELD BEACH FL 33442

Name

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

City

FL

Zip Code

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

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME YOUNG, JAMES
STREET ADDRESS 1166 W NEWPORT CENTER DRIVE #114
CITY-ST-ZIP DEERFIELD BEACH FL 33442

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

TITLE VTD ☐ Delete
NAME LITT, SHARON M
STREET ADDRESS 6200 COURTNEY CAMPBELL CSWY, SUITE 300
CITY-ST-ZIP TAMPA FL 33607

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 4505 Woodland Corporate Blvd., Ste 100
CITY-ST-ZIP Tampa, FL 33614

TITLE SD ☐ Delete
NAME ROSENBAUM, LARRY
STREET ADDRESS 20030 CENTURY BLVD. #204
CITY-ST-ZIP GERMANTOWN MO 20874

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 12105 Darnestown Road, Suite 25
CITY-ST-ZIP Gaithersburg, MD 20878

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

4/18/01

954-571-9933

Date

Daytime Phone #

CR2E034 (10/00)