

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P95000019570
1. Entity Name
Ninety Eighth Street Property, Inc.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 JUL 11 PM 3:37

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <u>5905 SW 36 Way</u> Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State <u>Gainesville FL</u>		City & State	
Zip <u>32608</u>	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number <u>59-3304864</u>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name <u>John Stetson</u>
Street Address (P.O. Box Number is Not Acceptable) <u>5905 SW 36 Way</u>
City <u>Gainesville</u> FL Zip Code <u>32608</u>

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See Criteria on back) <input type="checkbox"/>	January 1 - May 1 Fee is \$150.00 After May 1, Fee is \$550.00 Amended UBR is \$61.25 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>P. John Stetson</u> <u>5905 SW 36 Way</u> <u>Gainesville FL 32608</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>V Robert Stern</u> <u>537 NE 1st Street</u> <u>Gainesville, FL 32601</u>
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<u>700006338377-5</u> <u>-07/12/02-01003-001</u> <u>****150.00 ****150.00</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE 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 on an attachment with an address, with all other like empowered.

SIGNATURE: John Stetson 7/9/02 352-32272444
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)

I John Stetson did not receive my 2002 U.B.R. for Ninety Eighth Street
Property, inc. Document #P95000019570.

John Stetson