

2600 UNIFORM BUSINESS REPORT (UBR)

1062

DOCUMENT # P95000019929

1. Entity Name

SAFE HARBOR PROPERTY MANAGEMENT, INC.

R

FILED

00 JUL 24 PM 3:32

Principal Place of Business

Mailing Address

233 N CALLIER BLVD
MARCO ISLAND FL 34145
US

P.O. BOX 285
MARCO ISLAND FL 34146-0285
US

SECRETARY OF STATE

TALLAHASSEE, FLORIDA

7/16/00 900171024 \$150.00



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

233 N Collie Blvd
Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0566311

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WILL, BRADLEY L
821 MANOR TERRACE
MARCO ISLAND FL 33937

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, 2000 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	P	<input type="checkbox"/> Delete
NAME	WILL, JEFFREY J	
STREET ADDRESS	1201 SUNBIRD AVENUE	
CITY-ST-ZIP	MARCO ISLAND FL 33937	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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

Date

Daytime Phone #

Jeffrey Will Pres

5/1/00

941-394-1101

DOC#: P95000019929

ACC 67603
pg. 208

Safe Harbor

Property Mgmt, Inc.

233 N. Collier Blvd.
Marco Island, FL 34145
(941) 394-1101

P. O. Box 285
Marco Island, FL 34146
(941) 394-9467 (FAX)

July 7, 2000

Division of Corporations
Uniform Business Report Filings
P. O. Box 1500 -
Tallahassee, FL 32302-1500

Re: Document No. P95000019929

Dear Sirs:

Upon receiving a second notice of filing from your office, I phoned and was advised you did not receive my 2000 Uniform Business Report (UBR).

I completed my report (copy enclosed) on May 1, 2000 and sent it to your office along with my check No. 8859 for \$150.

I was told to re-submit the report along with a letter of explanation.

Enclosed is a new check for \$150. I have voided my previous check No. 8859.

Respectfully,

Jeffrey Wilk