## 2001 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Mar 08, 2001 8:00 am DOCUMENT # **P95000023925 Secretary of State** SOUTHERN REALTY OF N.E. FLORIDA, INC. 03-08-2001 90027 016 \*\*\*150.00 Principal Place of Business Mailing Address 3202 SAWGRASS VILLAGE CIRCLE 3202 SAWGRASS VILLAGE CIRCLE PONTE VEDRA BEACH FL 32082 PONTE VEDRA BEACH FL 32082 817185 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3306055 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent-Name BARON, BARTLETT Street Address (P.O. Box Number is Not Acceptable) **BARTLETT & HEEKIN PA** 50 HWY A1A #103 PONTE VEDRA BCH FL 33082 Zip Code FL 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 FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. Change ☐ Addition TITI F ☐ Delete TITLE DAUSEND, THOMAS NAME NAME 3202 SAWGRASS VILLAGE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-7IP PONTE VEDRA BEACH FL 32082 CITY-ST-7IP Addition ☐ Change TITLE Delete TITLE ANTZAKLIS, BETH NAME NAME 3202 SAWGRASS VILLAGE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP TITLE: Delete ---TITLE - >-☐ Change Addition-WALCH, PETER A NAME NAME 3202 SAWGRASS VILLAGE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP PONTE VEDRA BEACH FL 32082 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CUY-ST-7IP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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: