

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000041244

1. Entity Name

SAXET REALTY, INC.

Principal Place of Business

222 SOUTH NAVY BLVD
PENSACOLA FL 32507

Mailing Address

222 SOUTH NAVY BLVD
PENSACOLA FL 32507-3614

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number 59-3317913

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOMYAK, CYNTHIA G
6565 NORTH "W" ST
SUITE 260
PENSACOLA FL 32505

7. Name and Address of New Registered Agent

Name Cynthia M Griffin
Street Address (P.O. Box Number is Not Acceptable)
330 E Sunset Avenue
City Pensacola FL 32507

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

TITLE	P	☐ Delete
NAME	CYNTHIA G. HOMYAK	
STREET ADDRESS	330 E. SUNSET AVE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	VP	☐ Delete
NAME	CYNTHIA G. HOMYAK	
STREET ADDRESS	330 E. SUNSET AVE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	S	☐ Delete
NAME	CYNTHIA G. HOMYAK	
STREET ADDRESS	330 E. SUNSET AVE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE	T	☐ Delete
NAME	CYNTHIA G. HOMYAK	
STREET ADDRESS	330 E SUNSET AVE	
CITY-ST-ZIP	PENSACOLA FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	President	☒ Change ☐ Addition
NAME	Cynthia M. Griffin	
STREET ADDRESS	222 S. Navy Blvd	
CITY-ST-ZIP	Pensacola, FL 32507	
TITLE	Cynthia M Griffin	☒ Change ☐ Addition
NAME	Cynthia M Griffin	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Cynthia M Griffin	☒ Change ☐ Addition
NAME	Cynthia M Griffin	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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

Date

Daytime Phone #

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90041 003 ***150.00



DO NOT WRITE IN THIS SPACE

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