2001 UNIFORM BUSINESS REPORT (UBR)

13. I hereby certify that the information supplied with this tillogindicated on this report or supplier rental reports true and of the corporation or the receiver transaction powered to

changed, or on an attackmen

Apr 05, 2001 8:00 am Secretary of State DOCUMENT # P95000080021 1. Entity Name JB REALTY OF SRQ. INC. 04-05-2001 90009 028 ***150.00 Principal Place of Business Mailing Address 5310 HUNTINGTON COURT 5310 HUNTINGTON COURT C/O GERALD L. BOEVE C/O GERALD L. BOEVE SARASOTA FL 34235 SARASOTA FL 34235 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 65-0565402 Not Applicable Zip 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 BOEVE, GERALD L Street Address (P.O. Box Number is Not Acceptable) 5310 HUNTINGTON COURT SARASOTA FL 34235 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. 12. ☐ Change Addition TITLE ☐ Detete TITLE BOEVE, GERALD L. NAME NAME 5310 HUNTINGTON COURT STREET ADDRESS STREET ADDRESS SARASOTA FL 34235 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE BOEVE, DONNA M. NAME NAME 5310 HUNTINGTON COURT STREET ADDRESS STREET ADDRESS SARASOTA FL 34235 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

oes per qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information character and that my signature shall have the same legal effect as if made under oath; that I am an officer or director that I am an officer