

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

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 91161 029 ***150.00

DOCUMENT # *P96000032053 (1)*

1. Entity Name

AHLER REALTY COMPANY



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

591 JUPITER BLVD NW

3. Mailing Address

591 JUPITER BLVD NW

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PALM BAY, FL

City & State

PALM BAY, FL

4. FEI Number

59-3373117

Applied For

Not Applicable

Zip

Country

32907

BREVARD

Zip

Country

32907

BREVARD

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

JUDITH K. AHLER - FRIDDLE

Street Address (P.O. Box Number is Not Acceptable)

591 JUPITER BLVD. NW

City

PALM BAY

FL

Zip Code

32907

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Judith K. Ahler-Friddle*
Signature, typed or printed name of registered agent and title (if applicable)

JUDITH K. AHLER - FRIDDLE

4/30/03

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE *DPST*
NAME *AHLER - FRIDDLE, JUDITH K*
STREET ADDRESS *591 JUPITER BLVD. NW*
CITY - ST - ZIP *PALM BAY FL 32907*

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**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Judith K. Ahler-Friddle*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JUDITH K. AHLER - FRIDDLE

DATE

4/30/03

Daytime Phone #

321-984-8883

CR2E034B (12/02)