

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90109 037 ***150.00

DOCUMENT # P96000040296

1. Entity Name
STILES HOLDINGS AND INVESTMENT PARTNERSHIP, INC.

Principal Place of Business
300 SE 2ND STREET
FORT LAUDERDALE FL 33301

Mailing Address
300 SE 2ND STREET
FORT LAUDERDALE FL 33301

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **65-0673335**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JONES, PATRICIA
C/O STILES CORP
300 SE 2ND STREET
FORT LAUDERDALE FL 33301

7. Name and Address of New Registered Agent

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, 2002 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 **DP** ☐ Delete
NAME **STILES, TERRY W**
STREET ADDRESS **300 SE 2ND STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE **VT** ☐ Delete
NAME **EAGON, DOUGLAS P**
STREET ADDRESS **300 SE 2ND STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE **V** ☐ Delete
NAME **PALMER, STEPHEN R**
STREET ADDRESS **300 SE 2ND STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE **VS** ☐ Delete
NAME **JONES, PATRICIA**
STREET ADDRESS **300 SE 2ND STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE **V** ☐ Delete
NAME **STINE, JAMES W**
STREET ADDRESS **300 SE 2ND STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

TITLE **V** ☐ Delete
NAME **FERRERA, ROCCO**
STREET ADDRESS **300 SE 2ND STREET**
CITY-ST-ZIP **FORT LAUDERDALE FL 33301**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-02 95A-627-9300
 Date Daytime Phone #

CR2E034 (9/01)

Attachment 355813

DOG# P16 650040296

UNIFORM BUSINESS REPORT

11. CONTINUED

TITLE:

V

NAME:

O'SHEA, DENNIS F.

STREET ADDRESS:

300 SE 2nd St.

CITY-ST-ZIP:

Ft. Lauderdale, FL 33301