

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2001 8:00 am
Secretary of State

0015919

DOCUMENT # P96000059557

1. Entity Name

JONATHAN'S LANDING REALTY, INC.

04-28-2001 90069 022 ***150.00

Principal Place of Business

**400 TONEY PENNA DR
 JUPITER FL 33458
 US**

Mailing Address

**400 TONEY PENNA DR
 JUPITER FL 33458
 US**

0003416J



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GELFAND, MICHAEL J.
 ONE CLEARLAKE CENTRE
 250 AUSTRALIAN AVE #1010
 WEST PALM BEACH FL 33401**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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, 2001 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: **TD** Delete
 NAME: **MYERS, KENNETH W.**
 STREET ADDRESS: **3476 SOUTHERN CAY DR**
 CITY-ST-ZIP: **JUPITER FL 33477**

TITLE: **TD** Change Addition
 NAME: **FORBUSH ROBERT B.**
 STREET ADDRESS: **16322 PORT DICKINSON DRIVE**
 CITY-ST-ZIP: **JUPITER FL 33477**

TITLE: **PD** Delete
 NAME: **HOWE, WILLIAM R.**
 STREET ADDRESS: **3811 SHEARWATER DR**
 CITY-ST-ZIP: **JUPITER FL 33477**

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: **SD** Delete
 NAME: **HARRISON, W. ALLEN**
 STREET ADDRESS: **3200 PILOTS POINT CIRCLE**
 CITY-ST-ZIP: **JUPITER FL 33477**

TITLE: **SD** Change Addition
 NAME: **MATTISON JR. WILLIAM C**
 STREET ADDRESS: **3330 BRIDGEGATE DRIVE**
 CITY-ST-ZIP: **JUPITER FL 33477**

TITLE: **P** Delete
 NAME: **HOWE, WILLIAM R**
 STREET ADDRESS: **3811 SHEARWATER DR**
 CITY-ST-ZIP: **JUPITER FL 33477**

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Delete
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Change Addition
 NAME: _____
 STREET ADDRESS: _____
 CITY-ST-ZIP: _____

TITLE: Delete
 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: W. R. Howe
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/01
Date

743-0681
Daytime Phone #

CR2E034 (10/00)