

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000075953

1. Entity Name

WATAGA REALTY, INC.

FILED
Mar 05, 2001 8:00 am
Secretary of State

03-05-2001 90308 038 ***150.00

Principal Place of Business
500 S. Flagler Drive
Suite 300
West Palm Beach, FL 33401

Mailing Address
L. Frank Chopin
550 S. Flagler Drive
Suite 300
West Palm Beach, FL 33401

2. Principal Place of Business
500 S. Flagler Drive

Suite, Apt. #, etc.

Suite 300

City & State

West Palm Beach, FL

Zip
33401

Country
USA

3. Mailing Address

505 S. Flagler Drive

Suite, Apt. #, etc.

Suite 300

City & State

West Palm Beach, FL

Zip
33401

Country

4. FEI Number

65-0699079

Applied For

Not Applicable

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CHOPIN, L. FRANK
505 S. Flagler Drive
Suite 300
West Palm Beach, FL 33401

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, 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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PSTD
CHOPIN, L. FRANK
505 S. Flagler Drive
West Palm Beach, FL 33401

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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☐ Change ☐ Addition

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 registered 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 fee empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/23/01

(561) 655-9500

Date

Daytime Phone #