## 2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

## May 24, 2002 8:00 am Secretary of State P96000083682 DOCUMENT # 1. Entity Name 05-24-2002 91298 009 \*\*\*150.00 FLORIDA COAST REALTY AND INVESTMENT, INC. Mailing Address Principal Place of Business 415 PINEDA COURT 415 PINEDA COURT SUITE A SUITE A MELBOURNE FL 32940 MELBOURNE FL 32940 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4, FEI Number City & State City & State 59-3435515 Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired Zip Fee Required 27. Name and Address of New Registered Agent. 6. Name and Address of Current Registered Agent COLEMAN, CHRISTOPHER J ESQ Street Address (P.O. Box Number is Not Acceptable) 1800 W. HIBISCUS BLVD **SUITE 138** Zip Code City MELBOURNE FL 32901 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 4 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After May 1, 2002 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition TITLE ☐ Delete TITLE SD NAME NAME CLERC, JEAN-YVES STREET ADDRESS 415 PINEDA COURT SUITE A STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP **MELBOURNE FL 32940** ☐ Addition Change Delete TITLE TITLE NAME NAME GREENE, JAN ALLEN STREET ADDRESS STREET ADDRESS 2555 TROTTERS TRAIL CITY-ST-ZIP CITY-ST-ZIP COCOA FL 32926 ☐ Change... - ☐ Addition Delete Delete TITLE = TITLE TD NAME CLERC, JOSEE STREET ADDRESS STREET ADDRESS 415 PINEDA COURT SUITE A CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL 32940 ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition Change Delete TITLE NAME NAME STREET ADORESS STREET ADDRESS CITY-ST-ZIP 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.

**FILED**