

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000100132

Entity Name
HOWEY ACQUISITION, INC.

FILED
Feb 20, 2002 8:00 am
Secretary of State

02-20-2002 90138 031 ***150.00

0482160 AV

Principal Place of Business
13831 VECTOR AVENUE
STE 105
FT MYERS FL 33907
US

Mailing Address
13831 VECTOR AVENUE
STE 105
FT MYERS FL 33907
US



DO NOT WRITE IN THIS SPACE

Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
c/o ResortQuest International, Inc.
Suite, Apt. #, etc.
530 Oak Court Dr., Suite 360

City & State
Memphis, TN

4. FEI Number
38-3334543

Applied For
Not Applicable

Zip
38117

Country
USA

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

6. Name and Address of Current Registered Agent
CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD
PLANTATION FL 33324

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 _____ (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 NAME STREET ADDRESS CITY-ST-ZIP	VP WILLIAMS, ALLEN C 15160 FIDDLESTICKS BLVD FT MYERS FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS BUECKLER, KELLEY M 530 OAK COURT DR., STE. 360 MEMPHIS TN	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SELBERG, DAVID 530 OAK COURT DR., STE. 360 MEMPHIS TN 38117	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO LEVINE, DAVID L 530 OAK COURT DR., STE. 360 MEMPHIS TN	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MURPHY, J SCOTT 530 OAK COURT DRIVE SUITE 360 MEMPHIS TN 38117	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 13831 Vector Avenue, Suite 105 Fort Myers, FL 33907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition AS Karen M. Ray 530 Oak Court Dr., Suite 360 Memphis, TN 38117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VP/T
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition CEO/D Memphis, TN 38117
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VP/CON
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition VP/GEN COUN/SEC M. Ronald Halpern 530 Oak Court Drive, Suite 360 Memphis, TN 38117

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:

Karen M. Ray, Assistant Secretary

1/28/02

901/762-4029

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)