

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 09, 2003 8:00 am
Secretary of State

05-05-2003 91846 019 ***550.00

DOCUMENT # P97000034064

1. Entity Name
T&L DEVELOPMENT INC.



Principal Place of Business
**1474 RAIL HEAD BLVD.
SUITE 103
NAPLES FL 34110
US**

Mailing Address
**1474 RAIL HEAD BLVD.
SUITE 103
NAPLES FL 34110
US**

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 **65-0766051**

Applied For

Not Applicable

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

**ADRAGNA, TILDA
6930 SABLE RIDGE LANE
NAPLES FL 33109**

Name

Street Address (P.O. Box Number is Not Acceptable)

1474 Rail Head Blvd Suite 103

City

FL

Zip Code

34110

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **P** ☐ Delete
NAME **ADRAGNA, TILDA**
STREET ADDRESS **6930 SABLE RIDGE LANE**
CITY-ST-ZIP **NAPLES FL 34109**

TITLE ☒ Change ☐ Addition
NAME **1474 Rail Head Blvd #103**
STREET ADDRESS **34110**
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **GERVASI, BEVERLY**
STREET ADDRESS **3908 UPOLO LANE**
CITY-ST-ZIP **NAPLES FL 34119**

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

TITLE **T** ☐ Delete
NAME **ADRAGNA, ANDY**
STREET ADDRESS **6930 SABLE RIDGE LN**
CITY-ST-ZIP **NAPLES FL 34109**

TITLE **T/VP** ☒ Change ☐ Addition
NAME **1474 Rail Head Blvd #103**
STREET ADDRESS **34110**
CITY-ST-ZIP

TITLE **VP** ☐ Delete
NAME **ADRAGNA, LEONARDO**
STREET ADDRESS **6930 SABLE RIDGE LN**
CITY-ST-ZIP **NAPLES FL 34109**

TITLE ☒ Change ☐ Addition
NAME **1474 Rail Head Blvd #103**
STREET ADDRESS **34110**
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

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/4/03

239 597-2224

Date

Daytime Phone #

CR2E034 (10/02)