

2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 28, 2002 8:00 am**  
**Secretary of State**

03-28-2002 90361 028 \*\*\*150.00

**DOCUMENT # P97000039833**  
 1. Entity Name  
**NOLYN PROPERTIES, INC.**

Principal Place of Business      Mailing Address  
**2417 E. ORANGEHILL AVE.**      **2417 E. ORANGEHILL AVE.**  
**PALM HARBOR FL 34683**      **PALM HARBOR FL 34683**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business      3. Mailing Address  
**602 Fayette Dr. S.**      **Nolyn Properties, Inc.**  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.  
**Safety Harbor, FL.**      **602 Fayette Dr. S.**  
 City & State      City & State  
**Safety Harbor, FL.**

Zip      Country      Zip      Country  
**34695**      **Pinellas**      **34695**      **Pinellas**

4. FEI Number      Applied For  
**59-3451185**      Not Applicable  
 5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**JONES, LINDA D**  
**2417 E. ORANGEHILL AVE.**  
**PALM HARBOR FL 34683**

7. Name and Address of New Registered Agent  
 Name  
**Linda D Jones**  
 Street Address (P.O. Box Number is Not Acceptable)  
**602 Fayette Dr. S.**  
 City      State      Zip Code  
**Safety Harbor**      **FL**      **34695**

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 **Linda D. Jones**  
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, 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	<b>P</b>	<input type="checkbox"/> Delete
NAME	<b>JONES, L. NOEL</b>	
STREET ADDRESS	<b>2417 ORANGEHILL AVENUE</b>	
CITY-ST-ZIP	<b>PALM HARBOR FL 34683</b>	
TITLE	<b>ST</b>	<input type="checkbox"/> Delete
NAME	<b>JONES, LINDA D</b>	
STREET ADDRESS	<b>2417 E ORANGE HILL AVENUE</b>	
CITY-ST-ZIP	<b>PALM HARBOR FL 34683</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>L. Noel Jones II</b>	
STREET ADDRESS	<b>602 Fayette Dr. S.</b>	
CITY-ST-ZIP	<b>Safety Harbor, FL-34695.</b>	
TITLE	<b>ST</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>Linda D. Jones</b>	
STREET ADDRESS	<b>602 Fayette Dr. S.</b>	
CITY-ST-ZIP	<b>Safety Harbor, FL- 34695</b>	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: **Linda D. Jones II**      Date:      Daytime Phone #: **727-669-5255**

CR2E034 (9/01)