2001 UNIFORM BUSINESS REPORT (UBR) FILED DOCUMENT # P970000 49169 May 04, 2001 8:00 am Secretary of State CSYC PROPERTIES, INC. 05-04-2001 90151 019 ***150.00 Principal Place of Business Mailing Address 12930 YACHT CLUB PLACE 12930 YACHT CLUB PLACE CORTEZ, FL 34215 CORTEZ, FL 34215 3. Mailing Address
12930 YACHT CLUB PLACE 2. Principal Place of Business **NNA6780** 12930 YACHT CLUB PLACE DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number City & State Applied For City & State 65-0758360 CORTEZ MRTE 2 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired 34215 usa Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent ROBERT BORNE Street Address (P.O. Box Number is Not Acceptable) 12926 YACHT CLUB PLACE 12930 YACHT CLUB PLACE MRTEZ, FL, 34215 CORTEX anging its registered office or registered agent, or both, in the State of Florida. 8. The above named entity submits this statement for SIGNATURE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2001 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. Addition ANDERSON, HARVEY TITLE Change ☐ Delete NAME 12930 YACHT CLUBPLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORTEZ FL 34215 CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE BORNE ROBERT 12926 YACHT CLUB PLACE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CORTEZ FL 34215 CITY-ST-ZIF ☐ Change ☐ Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 li SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO