200	uniform Busi	NESS REP	ORT (U	BR)	PAC	1e 10+ 2		0.
	MENT # P97000049	725	<u> </u>		San			<i>n</i> . −
1. Entity Nan Encor			1	المالقائب ببرب	EO F	• <u>-</u>		
<u> </u>	e Realty Inc Orpony	W00 - 10581			OF VISION OF CORPORATIONS			
<b>-</b>	ce of Business	Mailing Address	e e e e e e e e e e e e e e e e e e e			00 MAY -8	AM IO: 21	<u> </u>
5542 N Ste 11	. U.S. Hwy 41 4-A FL 33572	65427NC HUUS APOLLO BEACH FL 3357		. Ste	114-A		HI 10. 3	y
. Principal F	Place of Business	3. Mailing Address						
Suite, Apt.	. #, etc.	Suite, Apt, #, etc.			DO NOT WRITE IN THIS SPACE			
City & Stat	te	City & State			5953320195			Applied For
Zip Country		Zip	Country		5. Certificate of Status Desired S8.75 Additional Fee Required			
	6. Name and Address of Current F	egistered Agent	Nan	ne / a a a		ess of New Register	ed Agent	
	ENE, CAROL D & NO. U.S. HIGHWAY 41	Stre		(P.O. Box Number is Not Acceptable)				
SUITE (14-A			6341 51E		114-A			
APO	LLO BEACH FL 33572		City			· · · F	Zip C	ode 3572
The above	named entity submits this statement (q	the purpose of changing it	ts registered office					<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
Tàx filing r	oration is eligible to satisfy its Intangible requirement and elects to do so.	FILE NOW After MAY 1, 2 Make Check Paya	000 Fee will be	e \$550.00	Trust Fur	Campaign Financing and Contribution.		.00 May Be ded to Fees
1. ( <sub>y</sub>	OFFICERS AND D	PIRECTORS Delete	12.		<del></del>	IGES TO OFFICERS A		
	GREENE, CAROL D 1018 SILVER PALM WAY APOLLO BEACH FL 33752	NAME STREET ADDR	ESS					
TLE AME TREET ADDRESS '	ANDERSEN, WAYNE J 1018 SILVER PALM WAY APOLLO BEACH FL 33752	TITLE NAME STREET ADDRI CITY-ST-ZIP	automation and automation of					
TLE AME IREET ADDRESS TY-ST-ZIP	71 JEES BEJOHN C 3070E	TITLE NAME	TITLE NAME STREET ADDRESS  Change				e 🔲 Addition	
TLE PRÉET ADDRESS TY-ST-ZIP	3,5	Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP	ESS	·		☐ Change	e 🔲 Adaition
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TLE AME REET ADDRESS TY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRE CITY-ST-ZIP		8-00	AR was	Change	10581
of the cor	certify that the information supplied with to this report or supplemental report is to poration or the receiver or trustee empower or on an attachment with an address, with the supplement with an address.	ue and accurate and that recent to execute this report	my signature sha t as required by	all have the s	ame legal effect as if	made under oath: tha	t Lam an offic	er or director

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000049725

1. Entity Name

Encore Realty Inc.

Principal Place of Business

Mailing Address

Never Tecewed the form- used another company & white out