

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 14, 2001 8:00 am
Secretary of State

05-14-2001 90176 046 ***150.00

DOCUMENT # P97000056705

1. Entity Name
ISLAND COAST DEVELOPMENT, INC.

Principal Place of Business

1088 JARDIN DRIVE
 NAPLES FL 34104
 US

Mailing Address

1088 JARDIN DRIVE
 NAPLES FL 34104
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3900 Orange Grove Blvd
 Suite, Apt. #, etc.

3. Mailing Address

PO Box 306777
 Suite, Apt. #, etc.

City & State

N. Ft Myers Fla

City & State

Bonita Springs fl

Zip
 33903

Country
 Lee

Zip
 34136

Country
 Lee

4. FEI Number 59-3458394

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MIKLAVCIC, JOSEPH W
 716 WILLOWHEAD DRIVE
 NAPLES FL 34103

7. Name and Address of New Registered Agent

Name Joseph W. Miklavcic

Street Address (P.O. Box Number is Not Applicable)
 1504 SW 58th Street

City Cape Coral **FL** **Zip Code** 33914

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

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

Joseph W. Miklavcic

(NOT Registered Agent signature required when reinstating)

DATE

4/30/01

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, 2001 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 STV ☐ Delete
NAME MIKLAVCIC, JOSEPH W
STREET ADDRESS 716 WILLOWHEAD DR.
CITY-ST-ZIP NAPLES FL 34103

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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STREET ADDRESS
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CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

☒ Change ☐ Addition
TITLE
NAME
STREET ADDRESS 1504 SW 58th Street
CITY-ST-ZIP Cape Coral FL 33914

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

☐ Change ☐ Addition
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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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Joseph W. Miklavcic

Date

4-30-01

Daytime Phone #

941-992-6677

CR2E034 (10/00)