

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 20, 2001 8:00 am
Secretary of State

03-20-2001 90025 028 ***150.00

DOCUMENT # P97000064085

1. Entity Name

MLK PROPERTIES, INC.

Principal Place of Business

**5577 CONTENTO DRIVE
 SARASOTA FL 34242**

Mailing Address

**5577 CONTENTO DRIVE
 SARASOTA FL 34242**

2. Principal Place of Business

P.O. Box 3282
 Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 3282
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

SARASOTA FL

City & State

SARASOTA FL

4. FEI Number

65-0771773

Applied For

Not Applicable

Zip

34230

Country

USA

Zip

34230

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**REINICKE, STEPHANIE A
 1800 SECOND STREET
 SUITE 803
 SARASOTA FL 34236**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

(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, 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 **ST** ☒ Delete
 NAME **GLADSTONE, ROBERT**
 STREET ADDRESS **5577 CONTENTO DRIVE**
 CITY-ST-ZIP **SARASOTA FL 34242**

TITLE **PD** ☐ Delete
 NAME **GLADSTONE, HOWARD**
 STREET ADDRESS **5577 CONTENTO DRIVE P.O. Box 3282**
 CITY-ST-ZIP **SARASOTA FL 34242 Sarasota FL 34230**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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

Date

Daytime Phone #

3/15/01 941-330-1322

CR2E034 (10/00)

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