

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000067245

1. Entity Name
BDG-AVILA AT GREY OAKS, INC.

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90091 020 ***150.00

Principal Place of Business

Mailing Address

2154 TRADE CENTER WAY
SUITE 3
NAPLES FL 34109

2154 TRADE CENTER WAY
SUITE 3
NAPLES FL 34109

2. Principal Place of Business c/o
Landmark Development Group

3. Mailing Address c/o
Landmark Development Group

Suite, Apt. #, etc.
5668 Strand Court, #108

Suite, Apt. #, etc.
5668 Strand Court, #108

City & State
Naples, FL

City & State
Naples, FL

Zip
34110

Country
US

Zip
34110

Country
US

4. FEI Number 59-3467484

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CLASP, INC.
CUMMINGS & LOCKWOOD
3001 TAMiami TR N. 4 FLR
NAPLES FL 34103

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SHAFRAN, ARTHUR
5100 TAMiami TRAIL N, STE 158
NAPLES FL 34103 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D, P
Arthur A. Shafran
5668 Strand Court, #108
Naples, FL 34110 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D, V, S
James E. Pierce
5668 Strand Court, #108
Naples, FL 34110 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V, T, Assistant Secretary
David Crowley
5668 Strand Court, #108
Naples, FL 34110 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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

Arthur A. Shafran, President

Date

Daytime Phone #

941-597-8400

CR2E034 (10/00)