

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State
 01-30-2001 90193 041 ***150.00

DOCUMENT # P97000074002

1. Entity Name

R & D GULFCOAST, INC.

Principal Place of Business

**26445 BUCK LANE
 BONITA SPRINGS FL 34134
 US**

Mailing Address

**P O BOX 366128
 BONITA SPRINGS FL 34135
 US**

2. Principal Place of Business

15400 Milan lane
 Suite, Apt. #, etc.

3. Mailing Address

15400 Milan lane
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Naples, Florida

City & State

Naples, Florida

4. FEI Number

59-3464793

Applied For

Not Applicable

Zip

Country

34110 USA

Zip

Country

34110 USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**GARLICK, THOMAS B
 8889 PELICAN BAY BLVD., SUITE 300
 NAPLES FL 34108**

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 **D** ☐ Delete
 NAME **RUBINTON, JON**
 STREET ADDRESS **P O BOX 366128 N.A**
 CITY-ST-ZIP **BONITA SPRINGS FL 34135**

TITLE **VP** ☐ Delete
 NAME **DUCHARME, GREGGORY**
 STREET ADDRESS **7401 BAY COLONY DRIVE**
 CITY-ST-ZIP **NAPLES FL 34108**

TITLE **PD** ☒ Delete
 NAME **FUBINTON, JON**
 STREET ADDRESS **PO BOX 366128**
 CITY-ST-ZIP **BONITA SPRINGS FL**

TITLE **S** ☐ Delete
 NAME **KIS, MICHELLE**
 STREET ADDRESS **7401 BAY COLONY DRIVE**
 CITY-ST-ZIP **NAPLES FL 34108**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** ☒ Change ☐ Addition
 NAME **Jon Rubinton**
 STREET ADDRESS **15400 Milan Lane**
 CITY-ST-ZIP **Naples, FL 34110**

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

TITLE ☐ 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

1/23/01 **1.941.947.7888**
 Date Daytime Phone #

CR2E034 (10/00)