

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000077387

1. Entity Name

ESCANABA PROPERTIES, INC.

FILED

May 02, 2001 8:00 am  
Secretary of State

05-02-2001 90118 018 \*\*\*150.00

Principal Place of Business

2844 BANYAN CIR., N.W.  
BOCA RATON FL 33431

Mailing Address

2844 BANYAN CIR., N.W.  
BOCA RATON FL 33431

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

APPLIED FOR  
65-0985660

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

ROSEMURGY, JAMES  
2844 BANYAN CIR., N.W.  
BOCA RATON FL 33431

Name

Rosemurgy, James

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

1600 Royal Palm Way

City

Boca Raton

FL

Zip Code

33432

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

JAMES M. Rosemurgy

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/27/01

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

D  
ROSEMURGY, JAMES  
2844 BANYAN CIR., N.W.  
BOCA RATON FL 33431

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Rosemurgy, James  
1600 Royal Palm Way  
Boca Raton, Fl. 33432

☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

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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:

JAMES M. Rosemurgy

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/27/01

Daytime Phone #

561-994-8154

CR2E034 (10/00)