

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000080947

1. Entity Name

ASTER LANE, INC.

FILED

Apr 23, 2001 8:00 am  
Secretary of State

04-23-2001 90212 029 \*\*\*150.00

Principal Place of Business

Mailing Address

21 SOUTHEAST HARBOR POINT DRIVE  
STUART FL 34996

21 SOUTHEAST HARBOR POINT DRIVE  
STUART FL 34996

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 65-0785828

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

MORTELL, EDWIN E III  
400 FLAMINGO AVENUE  
STUART FL 34996

Name

Mortell, Edwin E, III

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

301 E. Ocean Blvd, Suite 200

City

Stuart

FL

Zip Code  
34994

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

Edwin E. Mortell, III

DATE 4/13/01

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

(NOTE: Registered Agent signature required when reinstating)

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  
DP  
BARATTA, ROBERT O DR  
21 SOUTHEAST HARBOR POINT DRIVE  
STUART FL 34996 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
Baratta, Scott R  
3484 SW Forest Hills Court  
Palm City FL 34990 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
BARATTA, SCOTT R  
21 SE HARBOR POINT DR  
STUART FL 34996 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
Baratta, Scott R  
3484 SW Forest Hills Court  
Palm City FL 34990 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
BARATTA, GREGG P  
21 SE HARBOR POINT DR  
STUART FL 34996 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
Baratta, Gregg P  
1143 Wildridge  
Palm City FL 34990 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
MORTELL, MELISSA A  
124 S E WELLS RD  
STUART FL 34996 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DS  
BARRATA, CAROL  
21 SE HARBOR POINT DR  
STUART FL 34996 ☐ 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

Date

Daytime Phone #

CR2E034 (10/00)