

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 18, 2003 8:00 am
Secretary of State

04-18-2003 90211 036 ***150.00

DOCUMENT # p97000096857

1. Entity Name

Liberty Residential and Commercial, Inc.



DO NOT WRITE IN THIS SPACE

70043964

2. Principal Place of Business

1463 Oakfield Drive

3. Mailing Address

P.O. Box 2876

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Ste 134

City & State

City & State

Brandon, FL

Brandon, FL

4. FEI Number

59-3465777

Applied For

Not Applicable

Zip

Country

33511-0801

USA

Zip

Country

33509-2876

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Nathan J. Vaccaro, Jr.

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

1463 Oakfield Drive Ste 134

City

Brandon

FL

Zip Code

33511-0801

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

Director

Nathan J. Vaccaro, Jr.

**1463 Oakfield Drive Ste 134
Brandon, FL 33511-0801**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

12. 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 10 or on an attachment with an address, with all other like empowered.

Nathan J. Vaccaro, Jr.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/14/03 (813) 386-3500

Daytime Phone #

CR2E034B (12/02)