2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P97000102270 Feb 03, 2000 8:00 am 1. Entity Name Secretary of State CARLTON DEVELOPMENT COMPANY 02-03-2000 90007 047 ***150.00 Principal Place of Business Mailing Address 8000 HWY A1A 8000 HWY A1A VERO BEACH FL 32963-4216 VERO BEACH FL 32963-4216 2. Principal Place of Business 3. Mailing Address 7777 North AlA 7777 North AlA Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 65-0807396 Not Applicable Vero <u>Beach, FL</u> Vero Beach, FL Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 32963-4216 32963-4216 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Jeck. Philippe Esquire JECK, PHILIPPE ESQ Street Address (P.O. Box Number is Not Acceptable) C/O JECK, HARRIS & JONES LLP c/o Jeck, Harris & Jones, LLP 1601 E. INDIANTOWN RD-#400 1061 East Indiantown Road, Suite 400 JUPITER ISLAND FL 33477 City Jupiter for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity submits this statement ne of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed nar FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. PTSD XX Change ☐ Addition TITLE PD ☐ Delete TITLE SIMPSON, R. MASON NAME NAME Simpson, R. Mason 25 SADDLEBACK RD. STREET ADDRESS STREET ADDRESS 1736 Ocean Drive JUPITER ISLAND FL 33469 CITY-ST-ZIP CITY-ST-7IP Vero Beach, Florida 32963 Change XX Addition TITLE ☐ Delete TITLE NAME NAME Brittain, Rose Ann STREET ADDRESS STREET ADDRESS 8445 Chinaberry Road CITY-ST-ZIP CITY-ST-ZIP <u>Vero Beach, FL 32963</u> XX Addition ☐ Change ☐ Delete -TITLE . TITLE NAME Simpson, Cheryl R. -STREET ADDRESS STREET ADDRESS 1736 Ocean Drive CITY-ST-ZIP CITY-ST-ZIP <u>Vero Beach, Florida 32963</u> ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-7IP

SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/10/2000

(561) 231-3131

Daytime Phor

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