

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Aug 07, 2001 8:00 am
Secretary of State

08-07-2001 90009 050 ***558.75

DOCUMENT # P98000017557

1. Entity Name

COAKLEY BAY INVESTMENT Co, Inc

Principal Place of Business

Mailing Address

789 South Federal Highway Suite 310
Stuart, Florida 34994

420 US Highway One Suite 15N
North Palm Beach, FL 33408

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

33408

USA

4. FEI Number

65-0862250

Applied For

Not Applicable

5. Certificate of Status Desired

A

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

C0074901

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Corley, William E III
789 South Federal Highway
Bldg II Suite 310
Stuart, Florida 34994

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/P	☐ Delete
NAME	Knox, Robert T.	
STREET ADDRESS	789 South Federal Highway Suite 310	
CITY-ST-ZIP	STUART Florida 34994	
TITLE	D/S	☐ Delete
NAME	Entertine, Jack J.	
STREET ADDRESS	789 South Federal Highway Suite 310	
CITY-ST-ZIP	STUART, Florida 34994	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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:

Robert T. Knox President (Robert T. Knox)

8/1/2001

561-781-9900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (1/1/00)