

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 25, 1999 8:00 am  
Secretary of State

02-25-1999 90024 023 \*\*\*150.00

DOCUMENT # P98000018433

1. Corporation Name

URBAN FINANCING & DEVELOPMENT INC.



Principal Place of Business

1633 SAN MARCO BLVD. SUITE #2  
JACKSONVILLE FL 32207

Mailing Address

1633 SAN MARCO BLVD. SUITE #2  
JACKSONVILLE FL 32207

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/25/1998

4. FEI Number

59-3503271

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 10991-55 SAN JOSE BLVD

2a. Mailing Address

26 10991-55 SAN JOSE BLVD

Suite, Apt. #, etc.

22 SUITE 245

Suite, Apt. #, etc.

27 SUITE 245

City & State

23 JAX FL 32223

City & State

28 JAX, FL

Zip

24 32223

Country

25 DUVAL

Zip

29 32223

Country

30 DUVAL

9. Name and Address of Current Registered Agent

MCGRAW, DANE  
1633 SAN MARCO BLVD, SUITE #2  
JACKSONVILLE FL 32207

10. Name and Address of New Registered Agent

81 Name

DANE MCGRAW

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

10991-55 SAN JOSE BLVD

83

SUITE 245

84 City

JACKSONVILLE

FL

85 Zip Code

32223

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1-16-99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME MCGRAW, DANE  
STREET ADDRESS 1633 SAN MARCO BLVD, SUITE #2  
CITY-ST-ZIP JACKSONVILLE FL 32207

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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT ☒ Change ☐ Addition

1.2 NAME DANE MCGRAW

1.3 STREET ADDRESS 10991-55 SAN JOSE BLVD SUITE 245

1.4 CITY-ST-ZIP JAX, FL 32223

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Dane McGraw*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-16-99

904-923-1102

CR2E034 (11/98)