

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000021028

1. Entity Name

R&D BEACH PROPERTIES, INC.

FILED
Jan 30, 2001 8:00 am
Secretary of State

01-30-2001 90203 019 ***150.00

Principal Place of Business

26441 BRICK LANE
BONITA SPRINGS FL 34134

Mailing Address

PO BOX 366128
BONITA SPRINGS FL 34135-6128

2. Principal Place of Business

15400 Milan Lane
Suite, Apt. #, etc.

3. Mailing Address

15400 Milan Lane
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Naples, FL
34110 U.S.A.

City & State

Naples, FL
34110 U.S.A.

4. FEI Number 59-3505188

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

GARLICK, THOMAS B
8889 PELICAN BAY BLVD., STE. 300
NAPLES FL 34108

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 ☐ Delete
NAME RUBINTON, JON
STREET ADDRESS 26325 MAHOGANY PT CT
CITY-ST-ZIP BONITA SPRINGS FL 34134

TITLE PD ☐ Delete
NAME RUBINTON, JON
STREET ADDRESS 26445 RUBINTON LANE
CITY-ST-ZIP BONITA SPRINGS FL 34134

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 15400 Milan Lane
CITY-ST-ZIP Naples FL 34110

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS 15400 Milan Lane
CITY-ST-ZIP Naples, FL 34110

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

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

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/22/01 941.947.7888

CR2E034 (10/00)