

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000024623

1. Entity Name

TOP SIDE LAND, INC.

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90074 047 ***150.00

Principal Place of Business

Mailing Address

3585 S.E. ST. LUCIE BLVD.
STUART FL 34997

3585 S.E. ST. LUCIE BLVD.
STUART FL 34997-5433

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0851827

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

SELLIAN, EDWARD M
2800 S.E. MARKET PLACE
STUART FL 34997

Name Edward M Sellian
Street Address (P.O. Box Number is Not Acceptable)
6794 SE Isle Way
City Stuart FL 34996

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 Edward M Sellian DATE 4-4-2000

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Delete
NAME GROAT, JAMES
STREET ADDRESS 3585 SE ST LUCIE BLVD
CITY-ST-ZIP STUART FL 34997

TITLE President ☐ Change ☒ Addition
NAME Joseph Lehner
STREET ADDRESS 3585 SE St. Lucie Blvd
CITY-ST-ZIP Stuart FL 34997

TITLE D ☒ Delete
NAME GROAT, LINDA L
STREET ADDRESS 3585 SE ST LUCIE BLVD
CITY-ST-ZIP STUART FL 34997

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

TITLE D ☐ Delete
NAME SELLIAN, EDWARD M
STREET ADDRESS 6794 SE ISLE WAY
CITY-ST-ZIP STUART FL 34996

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

TITLE D ☐ Delete
NAME SELLIAN, SUZAN
STREET ADDRESS 6794 SE ISLE WAY
CITY-ST-ZIP STUART FL 34996

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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: Edward M Sellian
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-4-2000 561-221-1754
Date Daytime Phone #

CR2E034 (9/99)