

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 22, 2001 08:00 AM**
Secretary of State**DOCUMENT # P98000041471**1. Entity Name
ANCIENT CITY ARCHITECTURE, INC.

Principal Place of Business

100 SEAWOODS DRIVE SOUTH

S AUGUSTINE
32084

FL

Mailing Address

100 SEAWOODS DRIVE SOUTH

S AUGUSTINE
32084

FL

2. Principal Place of Business

100 SEAWOODS DRIVE SOUTH

3. Mailing Address

100 SEAWOODS DRIVE SOUTH

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

S AUGUSTINE

FL

City & State

S AUGUSTINE

FL

Zip
32080

Country

Zip
32080

Country

4. FEI Number

59-3510163

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

LEONE RONALD J
100 SEA WOODS DRIVE SOUTHST AUGUSTINE
32084

FL

7. Name and Address of New Registered Agent

Name

LEONE RONALD JPRES

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

100 SEA WOODS DRIVE SOUTH

City
ST AUGUSTINE

FL

Zip Code
32080

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 **RONALD J. LEONE****04/22/2001**

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
NAME LEONE RONALD J ☐ Delete
STREET ADDRESS 100 SEAWOODS DRIVE SOUTH
CITY-ST-ZIP S AUGUSTINE FL 32084TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME LEONE RONALD J ☒ Change ☐ Addition
STREET ADDRESS 100 SEAWOODS DRIVE SOUTH
CITY-ST-ZIP S AUGUSTINE FL 32080TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
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: **RONALD J. LEONE**

PRES

04/22/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)