

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000045524

1. Entity Name

FLORIDA LAND AUCTIONS, INC.

FILED

May 03, 2001 8:00 am
Secretary of State

05-03-2001 91164 036 ***150.00

Principal Place of Business

2645 HWY. 98 W.
MARY ESTHER FL 32569

Mailing Address

2645 HWY. 98 W.
MARY ESTHER FL 32569

2. Principal Place of Business

7373 Gulf Blvd

3. Mailing Address

7373 Gulf Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Navarre Beach, FL

City & State

Navarre Beach, FL

4. FEI Number

59-3513242

Applied For

Not Applicable

Zip

32566

Country

USA

Zip

32566

Country

USA

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

JESMONTH, RICHARD E
217 A. E. INTENDENCIA ST.
PENSACOLA FL 32501

Name

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

City

FLC

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME HERING, STEVE
STREET ADDRESS 2645 HWY. 98 W.
CITY-ST-ZIP MARY ESTHER FL 32569 ☒ Delete

TITLE James Herring
NAME 7373 Gulf Blvd
STREET ADDRESS Navarre Beach, FL 32566 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

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NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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:

James Herring

4/27/01

Date

850 916 7659

Daytime Phone #

CR2E034 (10/00)