

2000th UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000048185

1. Entity Name

F & N REALTY INC.

f

FILED
Jul 19, 2000 8:00 am
Secretary of State

07-19-2000 90019 031 ***150.00

Principal Place of Business

3361 SOUTH U.S. #1. STE. #4
FT. PIERCE FL 34982

Mailing Address

3361 SOUTH U.S. #1. STE. #4
FT. PIERCE FL 34982

A0068392



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0837203**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

CHIANESE, NEAL D
921C. SAVANNAS. PT. DR.
FORT PIERCE FL 34982

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 **P** ☐ Delete
NAME **CHIANESE, NICOLE P**
STREET ADDRESS **413 SW SILVER PALM COVE**
CITY-ST-ZIP **PORT SAINT LUCIE FL 34986**

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

TITLE **VT** ☐ Delete
NAME **CHIANESE, NEAL D**
STREET ADDRESS **921 E SAVANNAS PT DR**
CITY-ST-ZIP **FORT PIERCE FL 34982**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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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:

Neal D. Chianese **NEAL D. CHIANESE** 7/12/00 561-460-8313

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/00)

Attachment
Pg 8000048185
AUG 8392

F&N REALTY, INC.
3361 SO. U S #1 SUITE 4
FT. PIERCE, FL. 34982

JULY 12, 2000

FLORIDA DEPT. OF STATE
DIV. OF CORPORATIONS
TALLAHASSEE, FL.

GENTLEMAN;

ON JULY 12TH, OF THIS YEAR I RECEIVED A SECOND NOTICE FROM YOUR DEPARTMENT INDICATING THAT I HAD FAILED TO FILE FORM 2000 UNIFORM BUSINESS REPORT. I IMMEDIATELY CONTACTED YOUR OFFICE AND INDICATED THAT I HAD NEVER RECEIVED THE FIRST NOTICE FOR FILING SAID FORM. I WAS INSTRUCTED TO WRITE THIS LETTER OF EXPLANATION AND FILE AT ONCE, AND SUBMIT A CHECK FOR THE AMOUNT OF \$150.00.

THANK YOU FOR YOUR CONSIDERATION IN THIS MATTER.

A handwritten signature in cursive script, reading "Neal D. Chianese V.P. & T.", written over a horizontal line.

NEAL D. CHIANESE VICE PRESIDENT, TREASURER