

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90312 045 ***150.00

DOCUMENT # P98000050325

1. Entity Name
PAVEWAYS-GULF COAST, INC.

Principal Place of Business
4375 PROGRESS AVENUE, UNIT 4-C
NAPLES FL 34104
US

Mailing Address
4375 PROGRESS AVENUE, UNIT 4-C
NAPLES FL 34104
US

640556

2. Principal Place of Business

4110 Enterprise Ave
 Suite, Apt. #, etc.
Suite 119

3. Mailing Address

4110 Enterprise Ave
 Suite, Apt. #, etc.
Suite 119

City & State

Naples FL

City & State

Naples FL

Zip

34104

Country

Collier

Zip

34104

Country

Collier

4. FEI Number **65-0855301**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

MUCCI, MARK S
ONE FINANCIAL PLAZA, STE. 1600
FT. LAUDERDALE FL 33394

7. Name and Address of New Registered Agent

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 **LAMB, JOSEPH K JR**
 STREET ADDRESS **4375 PROGRESS AVENUE, UNIT 4-C**
 CITY-ST-ZIP **NAPLES FL 34104**

TITLE **V** ☐ Delete
 NAME **MUCCI, MARK S**
 STREET ADDRESS **1 FINANCIAL PLAZA STE 1600**
 CITY-ST-ZIP **FT LAUDERDALE FL 33394**

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 **President** ☒ Change ☐ Addition
 NAME **Lamb, Joseph K Jr**
 STREET ADDRESS **4110 Enterprise Ave Suite 119**
 CITY-ST-ZIP **Naples FL 34104**

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

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 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 #

941-430-3655

CR2E034 (10/00)