

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000051525

1. Entity Name

PELHAM PROPERTIES, INC.

Principal Place of Business

2194 HWY. A1A, SUITE 306
INDIAN HARBOUR BCH FL 32937

Mailing Address

1689 S. PATRICK DR.
INDIAN HARBOUR BCH FL 32937

2. Principal Place of Business

1689 S. Patrick Dr.

3. Mailing Address

Suite, Apt. #, etc.

Same

City & State

Indian Harbour Bch Florida

City & State

Zip

Country

32937

Brevard

Zip

Country

4. FEI Number

59-3522716

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NORTHCUTT, WILLIAM R ESQ.
2194 HWY. A1A, SUITE 306
INDIAN HARBOUR BCH FL 32937

7. Name and Address of New Registered Agent

Name

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

City

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 re-instating)

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
STREET ADDRESS
CITY-ST-ZIP
D
MOLINEAUX, DAVID P
265 POINCIANA DR.
INDIAN HARBOUR BCH FL 32937 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
MOLINEAUX, NANCY L
265 POINCIANA DR.
INDIAN HARBOUR BCH FL 32937 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VICE President
MOLINEAUX, Nancy L.
265 POINCIANA DRIVE
INDIAN HARBOUR Bch, FL 32937. ☐ Change ☒ Addition

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

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

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

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

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 employment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/01

(321)
777-4640

Date

Daytime Phone #

0081910

CR2E034 (10/00)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90028 031 ***150.00



DO NOT WRITE IN THIS SPACE