

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2003 8:00 am
Secretary of State

04-17-2003 90160 036 ***150.00

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000062720

1. Entity Name
FLA COMMERCIAL PROPERTIES, INC.



Principal Place of Business
**368 S.E. POMA WAY
STUART FL 34994**

Mailing Address
**368 S.E. POMA WAY
STUART FL 34994**



2. Principal Place of Business

2642 SE WILLOUGHBY BLVD

3. Mailing Address

2642 SE WILLOUGHBY BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State

STUART FL

City & State

STUART FL

4. FEI Number

65-0862464

Applied For

Not Applicable

Zip

34994

Country

Zip

34994

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

**PURINO, ALBERT T
368 S.E. POMA WAY
STUART FL 34994**

Name

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

2642 SE WILLOUGHBY BLVD

City

STUART

FL

Zip Code

34994

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

[Signature]

4/15/03

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **POMA, FRANK**
STREET ADDRESS **368 S.E. POMA WAY**
CITY-ST-ZIP **STUART FL 34994**

TITLE ☒ Change ☐ Addition
NAME **2642 SE WILLOUGHBY BLVD**
STREET ADDRESS **2642 SE WILLOUGHBY BLVD**
CITY-ST-ZIP **2642 SE WILLOUGHBY BLVD**

TITLE **D** ☐ Delete
NAME **PURINO, ALBERT T**
STREET ADDRESS **368 S.E. POMA WAY**
CITY-ST-ZIP **STUART FL 34994**

TITLE ☒ Change ☐ Addition
NAME **2642 S.E. WILLOUGHBY BLVD**
STREET ADDRESS **2642 S.E. WILLOUGHBY BLVD**
CITY-ST-ZIP **2642 S.E. WILLOUGHBY BLVD**

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/03

Date

772-287-9798

Daytime Phone #

CR2E034 (10/02)