

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000066380

1. Entity Name

RIB CITY PINE ISLAND, INC.

FILED
May 09, 2000 8:00 am
Secretary of State

05-09-2000 90097 048 ***150.00

Principal Place of Business

Mailing Address

2122 SECOND STREET
 FORT MYERS FL 33901

2122 SECOND STREET
 FORT MYERS FL 33901-3013

2. Principal Place of Business

9856 Stingfellow Road

3. Mailing Address

12575 S Cleveland Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

ST. JAMES CITY FL

City & State

FT. MYERS FL

Zip

Country

33945 USA

Zip

Country

33907 USA

4. FEI Number

65-0853922

Applied For

Not Applicable

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

GREEN, BRUCE D
 12800 UNIVERSITY DRIVE SUITE 600
 FORT MYERS FL 33901

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, 2000 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 PD ☐ Delete
 NAME PADON, PAUL D
 STREET ADDRESS 2122 SECOND ST
 CITY-ST-ZIP FORT MYERS FL 33901

TITLE PD ☒ Change ☐ Addition
 NAME Peden Paul D
 STREET ADDRESS 12575 S. Cleveland Ave
 CITY-ST-ZIP FT MYERS FL 33907

TITLE STD ☐ Delete
 NAME PADEN, CRAIG
 STREET ADDRESS 2122 SECOND ST
 CITY-ST-ZIP FORT MYERS FL 33901

TITLE STD ☒ Change ☐ Addition
 NAME Peden Craig
 STREET ADDRESS 12575 S. Cleveland Ave
 CITY-ST-ZIP FT MYERS FL 33907

TITLE V ☐ Delete
 NAME COOK, PETER M
 STREET ADDRESS 2122 SECOND ST
 CITY-ST-ZIP FORT MYERS FL 33901

TITLE V ☒ Change ☐ Addition
 NAME COOK Peter M
 STREET ADDRESS 12575 S Cleveland Ave
 CITY-ST-ZIP FT MYERS FL 33907

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: Peter M Cook *Peter M Cook*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/25/00 941-205-6700
 Date Daytime Phone #

CR2E034 (9/99)