

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 07, 2002 8:00 am
Secretary of State

05-07-2002 90237 033 ***150.00

DOCUMENT # **P98000076880**

1. Entity Name

Ringling Park Development, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1620 Gulf of Mexico Drive

Suite, Apt. #, etc.

City & State Longboat Key, FL

Zip 34228

Country USA

3. Mailing Address
c/o Stephen J. Mitchell

Suite, Apt. #, etc.

201 N. Franklin St., Suite 2100

City & State Tampa, FL

Zip 33602

Country USA

4. FEI Number 650874420

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fec Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name Dr. Murray J. Klauber

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

1620 Gulf of Mexico Drive

City Longboat Key

FL

Zip Code 34228

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) ☐

January 1 - May 1: Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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	Director/President/Secretary/Treasurer Dr. Murray J. Klauber 1620 Gulf of Mexico Drive Longboat Key, FL 34228
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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information furnished 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 authorized to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with or without other powers.

SIGNATURE:  Dr. Murray J. Klauber, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(941) 383-7419

Daytime Phone #

CR2E034B (12/01)