2001 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # P98000083472 Mar 05, 2001 8:00 am Secretary of State INSITE DEVELOPERS, INC. 03-05-2001 90291 002 ***150.00 Principal Place of Business Mailing Address 12222 HIGHWAY 27 NORTH 12222 HIGHWAY 27 NORTH DAVENPORT FL 33837 DAVENPORT FL 33837 816299 2. Principal Place of Business 3. Mailing Address Suite, Apt. #. etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For 4. FEl Number 59-3537001 Not Applicable Country Zìp Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GOROVITZ, AARON J Street Address (P.O. Box Number is Not Acceptable) 215 NORTH EOLA DR. ORLANDO FL 32801 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 reinstating) DATE FILE NOW!!! FEE IS \$150,00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (10/00) ☐ Delete ☐ Change Addition BORNSTEIN, DAVID NAME NAME STREET ADDRESS 12222 HIGHWAY 27 NORTH STREET ADDRESS CITY-ST-ZIP DAVENPORT FL 33837 CITY-ST-7IP TITLE ☐ Delete TITLE Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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

ith all other like empowered

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

changed, or on an attachmen

LOWNDES DROSDICK DOSTER KANTOR & REED, P.A.

Attorneys at Law

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GAIL S. ANDRÉ

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February 27, 2001

CERTIFIED MAIL 7099 3400 0008 0391 2685 RETURN RECEIPT REQUESTED

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, Florida 32302-1500

Re: 2001 Uniform Business Report

Dear Madam or Sir:

Enclosed herewith please find the 2001 Uniform Business Report for the corporation listed below, together with a check from our client in the amount of \$150.00 payable to the Department of State representing the filing fee:

INSITE DEVELOPERS, INC.

Please file the report immediately upon receipt. Thank you for your assistance in this matter.

Very truly yours,

Gail S. Andre' Legal Assistant to

Aaron J. Gorovitz

GSA Enclosures 038286/64396/424725