

2002 UNIFORM BUSINESS REPORT (UBR)

0125418 AT

DOCUMENT # P98000086758

1. Entity Name
3-R-1 PROPERTIES, INC.

FILED

02 NOV -8 PM 12:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business

101 AMERICAN CENTER PL
STE 101
TAMPA FL 33619
US

Mailing Address

3612 - 24TH STREET. SE
RUSKIN FL 33570
US

2. Principal Place of Business

3612 24th St SE

3. Mailing Address

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Ruskin FL

City & State

4. FEI Number 59-3536693

Applied For
Not Applicable

Zip
33570

Country
Hills

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PYLE, TERRENCE F
707 DEL WEBB BOULEVARD WEST
SUN CITY CENTER FL 33573

7. Name and Address of New Registered Agent

Name Duraunta L. Smith

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

3612 24th St SE

City Ruskin, FL

FL

Zip Code 33570

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, 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 \$550.00
After September 13, 2002 Fee will be \$750.00
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 VD
NAME SMITH, JAMES T
STREET ADDRESS 3612 24TH STREET SE
CITY-ST-ZIP RUSKIN FL 33570 ☐ Delete

TITLE VD
NAME JOHNSON, DAVID W
STREET ADDRESS 1730 WAKEFIELD DRIVE
CITY-ST-ZIP BRANDON FL 33511 ☐ Delete

TITLE PD
NAME SMITH, DURAUNTA L
STREET ADDRESS 3612 24TH STREET SE
CITY-ST-ZIP RUSKIN FL 33570 ☐ Delete

TITLE STD
NAME KIRBY, PATRICIA L
STREET ADDRESS 1730 WAKEFIELD DR
CITY-ST-ZIP BRANDON FL 33511 ☐ 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 ☐ Change ☐ Addition
7000008603727
10/28/02--01019--003 **750.00

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 empowerment.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10-10-02

Date

Daytime Phone #

(813) 309-9269

CR2E034 (4/02)