

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 31, 2003 8:00 am**  
**Secretary of State**

03-31-2003 90301 022 \*\*\*150.00

0436487 AV

DOCUMENT # P98000103876

1. Entity Name  
MOTTS CANYON INC.



Principal Place of Business  
340 N. COUNTRY CLUB BLVD.  
BOCA RATON FL 33487

Mailing Address  
340 N. COUNTRY CLUB BLVD.  
BOCA RATON FL 33487



2. Principal Place of Business  
1715 Avenida Del Sol  
Suite, Apt. #, etc.

3. Mailing Address  
1715 Avenida Del Sol  
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State  
Boca Raton FL  
Zip  
33432  
Country  
USA

City & State  
Boca Raton FL  
Zip  
33432  
Country  
USA

4. FEI Number 65-0884727

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

CROTTY, MICHAEL J  
340 N. COUNTRY CLUB BLVD.  
BOCA RATON FL 33487

7. Name and Address of New Registered Agent

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

SIGNATURE \_\_\_\_\_ (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 NAME STREET ADDRESS CITY-ST-ZIP	P CRATTY, J 340 N COUNTRY CLUB BLVD BOCA RATON FL 33487 <i>Crotty, M.J.</i> <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 another like empowered.

SIGNATURE: *Michael J. Crotty* *3/27/03* *561 367-0993*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)