

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 18, 2002 8:00 am**  
**Secretary of State**

04-18-2002 90413 006 \*\*\*150.00

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**DOCUMENT # P99000001423**

1. Entity Name  
**VINTAGE REALTY AND DEVELOPMENT CORPORATION**

Principal Place of Business

2561 TALON COURT  
 NAPLES FL 34105

Mailing Address

2561 TALON COURT  
 NAPLES FL 34105

00000000



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

**16661 TRADE CENTER WAY**  
 Suite, Apt. #, etc.  
**SUITE #2**

3. Mailing Address

**16661 TRADE CTR. WAY**  
 Suite, Apt. #, etc.  
**SUITE #2**

City & State

**NAPLES, FL**

City & State

**NAPLES, FL**

4. FEI Number

**59-3551442**

Applied For

Not Applicable

Zip

**34109**

Country

**USA**

Zip

**34109**

Country

**U.S.A.**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
 Fee Required

6. Name and Address of Current Registered Agent

~~LIEBERFARB, STANLEY J~~  
**C/O TREISER, KOBZA & LIEBERFARB, CHTD.**  
**4001 TAMiami TRAIL N., STE. 330**  
**NAPLES FL 34103**

7. Name and Address of New Registered Agent

Name **THOMAS A. COLLINS** **FL**  
 Street Address (P.O. Box Number is Not Acceptable)  
**TREISER, COLLINS & VERNON LLC**  
**4001 TAMiami TRAIL N. SUITE 330**  
 City **NAPLES** **FL** Zip Code **34103**

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

**4-8-02**

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, 2002 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

TITLE **D** ☐ Delete  
 NAME **DAVIDSON, SUE E**  
 STREET ADDRESS **2205 GOSHAWK COURT**  
 CITY-ST-ZIP **NAPLES FL 34105**

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
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TITLE ☐ Delete  
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 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ☐ Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

TITLE ☐ Change ☐ Addition  
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TITLE ☐ Change ☐ Addition  
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 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:

**SUE E. DAVIDSON, PRESIDENT**

**4/3/02** **239-643-**  
 Date Daytime Phone # **3150**

CR2E034 (9/01)