2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 09, 2002 8:00 am
Secretary of State
05-09-2002 90034 049 ***150.00

DOCUMENT # P99000005105

1. Entity Name
GATOR REALTY, INC.

Principal Place of Business	Mailing Address
~~6710 MAIN ST., STE. 233~~ ~~MIAMI LAKES FL 33014~~ c/o Bayshore Land Group, Inc.	~~6710 MAIN ST., STE. 233~~ ~~MIAMI LAKES FL 33014~~ c/o Bayshore Land Group, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
255 Alhambra Circle	255 Alhambra Circle
Suite, Apt. #, etc. Suite 325	Suite, Apt. #, etc. Suite 325
City & State Coral Gables, FL	City & State Coral Gables, FL
Zip 33134 Country USA	Zip 33134 Country USA

4. FEI Number 65-0896850 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MACNAIR, CHRISTOPHER J ~~6710 MAIN STREET, SUITE 233~~ ~~MIAMI LAKES FL 33014~~	Name Street Address (P.O. Box Number is Not Acceptable) c/o Bayshore Land Group, Inc. 255 Alhambra Circle, Suite 325 City Coral Gables **FL** Zip Code 33134

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 Christopher J. Mac Nair Pres. 4/30/02
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 $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			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MACNAIR, CHRISTOPHER J 6710 MAIN ST., STE. 233 MIAMI LAKES FL 33014	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☑ Change ☐ Addition c/o Bayshore Land Group, Inc. 255 Alhambra Circle, Suite 325 Coral Gables, FL 33134
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	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 empowered.

SIGNATURE: Christopher J. Mac Nair Pres. 4/30/02 305-445-6161
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/01)