

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

Amended

DOCUMENT # P 99000033124

1. Entity Name
BRIDGEPORT DEVELOPMENT, INC.

FILED

02 JUL 16 AM 10:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3825 HENDERSON BLVD.

3. Mailing Address
3825 HENDERSON BLVD.

Suite, Apt. #, etc.
SUITE 207

Suite, Apt. #, etc.
SUITE 207

City & State
TAMPA, FL

City & State
TAMPA, FL

Zip Country
33629 USA

Zip Country
33629 USA

4. FEI Number
59-3568778

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
ROBERT J. MARTIN

Street Address (P.O. Box Number is Not Acceptable)
3825 HENDERSON BLVD.

SUITE 207

City TAMPA FL Zip Code 33629

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
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 P/S
NAME ROBERT J. MARTIN
STREET ADDRESS 3825 HENDERSON BLVD., SUITE 207
CITY-ST-ZIP TAMPA, FL 33629

TITLE
NAME
STREET ADDRESS 600006592396--7
CITY-ST-ZIP -07/23/02--01055--009
*****61.25 *****61.25

TITLE V
NAME BRADFORD H. MAST
STREET ADDRESS 3825 HENDERSON BLVD., SUITE 207
CITY-ST-ZIP TAMPA, FL 33629

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME KATHERINE M. ENGLISH
STREET ADDRESS 3825 HENDERSON BLVD., SUITE 207
CITY-ST-ZIP TAMPA, FL 33629

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME MICHELE L. SINCLAIR-MARTIN
STREET ADDRESS 3825 HENDERSON BLVD., SUITE 207
CITY-ST-ZIP TAMPA, FL 33629

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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: *Bradford H. Mast* BRADFORD H. MAST

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-12-02 813-899-1422

Date

Daytime Phone #

CR2E034B (12/01)