

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000040063

1. Entity Name

THE PALMETTO REALTY GROUP, INC.

**FILED**  
**Apr 19, 2000 8:00 am**  
**Secretary of State**

04-19-2000 90055 039 \*\*\*150.00

Principal Place of Business

Mailing Address

73 MAGNOLIA DRIVE  
ST. AUGUSTINE FL 32084

73 MAGNOLIA DRIVE  
ST. AUGUSTINE FL 32084-4668

2. Principal Place of Business

3. Mailing Address

23 MYRTLE AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

PINE PLAINS, NY

Zip

Country

Zip

Country

12567

USA

4. FEI Number

59-3573433

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

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES FL 33134

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.

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 \$150.00**  
**After MAY 1, 2000 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 PD ☐ Delete  
NAME DEPRETER, JON  
STREET ADDRESS 73 MAGNOLIA DRIVE  
CITY-ST-ZIP ST. AUGUSTINE FL 32084

TITLE ☒ Change ☐ Addition  
NAME 23 MYRTLE AVE  
STREET ADDRESS PINE PLAINS, NY 12567  
CITY-ST-ZIP

TITLE VD ☐ Delete  
NAME MORRISON, WILLIAM  
STREET ADDRESS 73 MAGNOLIA DRIVE  
CITY-ST-ZIP ST. AUGUSTINE FL 32084

TITLE ☒ Change ☐ Addition  
NAME 8 BROADWAY ALLEY  
STREET ADDRESS NEW YORK, NY 10016  
CITY-ST-ZIP

TITLE STD ☐ Delete  
NAME DEPRETER, ANDREA  
STREET ADDRESS 73 MAGNOLIA DRIVE  
CITY-ST-ZIP ST. AUGUSTINE FL 32084

TITLE ☒ Change ☐ Addition  
NAME 23 MYRTLE AVE  
STREET ADDRESS PINE PLAINS, NY 12567  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME DEPRETER, JOHN L  
STREET ADDRESS 73 MAGNOLIA DRIVE  
CITY-ST-ZIP ST. AUGUSTINE FL 32084

TITLE ☒ Change ☐ Addition  
NAME 504 EMMA ST.  
STREET ADDRESS MT. HOLLY, NJ 08060  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
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:

SIGNATURE REGIONS DEPRETER

4/10/00 (518) 398-7513

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E03 4/1999