

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**


**FILED**  
**May 16, 2003 8:00 am**  
**Secretary of State**

05-16-2003 90180 037 \*\*\*150.00

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**DOCUMENT # P99000051221**

1. Entity Name  
**BELLEAIR REALTY INVESTMENT, INC.**



Principal Place of Business  
**2727 ULMERTON RD.  
STE. 350  
CLERAWATER FL 33762**

Mailing Address  
**2727 ULMERTON RD.  
STE. 350  
CLERAWATER FL 33762**

2. Principal Place of Business  
**12600 S. BELCHER Rd**

3. Mailing Address  
**12600 S. BELCHER Rd**


Suite, Apt. #, etc.  
**106-B**

City & State  
**LARGO, FL**

City & State  
**LARGO, FL**

Zip  
**33773**

Country  
**USA**



CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3675239** Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**SILVERSTEIN, MURRAY B  
BANK OF AMERICA TOWER  
ONE PROGRESS PLAZA STE 2200  
SAINT PETERSBURG FL 33701**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PSTD GEIGER, WILLIAM 2727 ULMERTON RD STE 350 CLEARWATER FL 33762</b>	<input checked="" type="checkbox"/> Delete <b>ADDRESS</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>12600 S BELCHER Rd LARGO, FL 33773</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 all other like empowered.

**SIGNATURE: *William Geiger* WILLIAM GEIGER** **4-23-03 717-336-0128**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)