

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90281 012 ***150.00

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1. Entity Name
LOQUAT MANAGEMENT CO., INC.



Principal Place of Business
51 GARDEN COVE DRIVE
KEY LARGO FL 33037

Mailing Address
51 GARDEN COVE DRIVE
KEY LARGO FL 33037

2. Principal Place of Business

51 Garden Cove dr.

3. Mailing Address

PO Box 2446

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
Key Largo, FL

Zip
33037

Country
USA

City & State
Key Largo, FL

Zip
33037

Country
USA

4. FEI Number 65-0931524

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

SLATE, SPENCER
51 GARDEN COVE DRIVE
KEY LARGO FL 33037

7. Name and Address of New Registered Agent

Name DEBORAH S. YATES

Street Address (P.O. Box Number is Not Acceptable)
28 S. EXUMA ROAD

City Key Largo

FL 33037

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 *Deborah S. Yates* VP-D (DEBORAH S. YATES)

DATE 3/27/03

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 P
NAME SLATE, SPENCER
STREET ADDRESS 51 GARDEN COVE DRIVE
CITY-ST-ZIP KEY LARGO FL 33037

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VP-D
NAME DEBORAH S. YATES
STREET ADDRESS 28 S. EXUMA ROAD
CITY-ST-ZIP KEY LARGO, FL. 33037

TITLE D
NAME SARAH T. YATES
STREET ADDRESS PO BOX 2446
CITY-ST-ZIP KEY LARGO, FL 33037

TITLE D
NAME GEORGE EASTWOOD YATES
STREET ADDRESS 11714 SW 135 PLACE
CITY-ST-ZIP MIAMI, FL 33186

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Deborah S. Yates* VP-D (DEBORAH S. YATES)

DATE 3/27/03

305)451-1407

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)