

FILED
Aug 22, 2003 8:00 am
Secretary of State

08-22-2003 90104 038 ***150.00

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

DOCUMENT # P99000065376

1. Entity Name

R. J. GATORS OF PORT ST. LUCIE, INC.



Principal Place of Business

609 N HEPBURN AVE
STE 103
JUPITER FL 33469

Mailing Address

609 N HEPBURN AVE
STE 103
JUPITER FL 33469

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State

City & State

4. FEI Number **65-0980679**

Applied For

Not Applicable

Zip

Country

Zip

Country

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

TIMTEO, REGINALD L
609 N HEPBURN AVE
STE 103
JUPITER FL 33469

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

FILE NOW!!! FEE IS \$550.00

After September 10, 2003 Fee will be \$750.00
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME ☐ Delete
P
STREET ADDRESS **TIMTEO, REGINALD**
CITY-ST-ZIP **6109 FOUNTAIN PALM DR.**
JUPITER FL 33458

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

TITLE NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Change ☐ Addition
STREET ADDRESS
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TITLE NAME ☐ Change ☐ Addition
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:

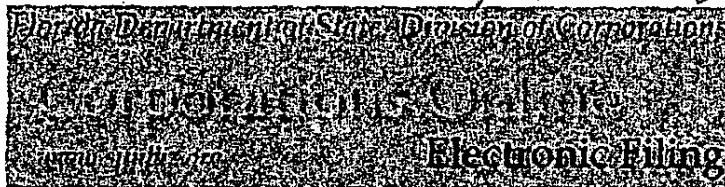
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (4/03)



Online Payment System

PAYMENT RECEIPT	
Transaction Amount:	\$150.00
Email Address:	8ILLC@RJGATORS.COM
Date/Time Paid:	04/16/2003 09:50:01
Payment ID Number:	1083019
Reference Number:	200016105652
<p>Thank you for using the LINK2GOV Online Payment System. Print this receipt for your records.</p> <p>You MUST select continue in order to receive your CONFIRMATION from the State.</p>	

Continue

Division of Corporations



Attachment

Division of Corporations
Uniform Business Report

80139863
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#P99000065376

Document Number
P99000065376

Thank you for filing your UBR online. Your report filed date will be today's date if there are no processing errors.

Your confirmation number is 200016105652.

Your charge amount is 150.00.

The Division of Corporations is collecting email addresses for the entities that would be interested in participating in an electronic UBR notification. This notification would preclude the use of a mailed document. If you would like to participate, please follow the link below and set up your user profile.

UBR Email Notification Signup

Sunbiz Home Page

Public Access Help