

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State
 05-06-2002 90136 003 ***150.00

DOCUMENT # P99000087364

1. Entity Name
PINE RIDGE DEVELOPMENT, INC.

Principal Place of Business

**11730 SW DALLAS DR N
 LAKE SUZY FL 34266**

Mailing Address

**11730 SW DALLAS DR N
 LAKE SUZY FL 34266**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

524 Wabash Terr.

Suite, Apt. #, etc.

524 Wabash Terr.

City & State

Port Charlotte, FL.

City & State

Port Charlotte, FL.

Zip

33954

Country

USA

Zip

33954

Country

USA

4. FEI Number

59-3611858

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**UEBELACKER, DIANA
 11730 SW DALLAS DR N
 LAKE SUZY FL 34266**

7. Name and Address of New Registered Agent

Name

Christine Murphy

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

524 Wabash Terrace

City

Port Charlotte

FL

Zip Code

33954

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 Christine Murphy

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

Christine Murphy

(NOTE: Registered Agent signature required when reinstating)

4/23/02

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, 2002 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

TITLE VP ☐ Delete
NAME MURPHY, THOMAS C
STREET ADDRESS 524 WABASH TERRACE
CITY-ST-ZIP PORT CHARLOTTE FL 33954

TITLE ST ☒ Delete
NAME UEBELACKER, MATTHEW M
STREET ADDRESS 11730 SW DALLAS DR N
CITY-ST-ZIP LAKE SUZY FL 34266

TITLE P ☒ Delete
NAME UEBELACKER, DIANA R
STREET ADDRESS 11730 SW DALLAS DR N
CITY-ST-ZIP LAKE SUZY FL 34266

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE President ☒ Change ☐ Addition
NAME Murphy, Thomas C.
STREET ADDRESS 524 Wabash Terrace
CITY-ST-ZIP Port Charlotte, FL. 33954

TITLE Vice President ☐ Change ☒ Addition
NAME Murphy, Christine
STREET ADDRESS 524 Wabash Terrace
CITY-ST-ZIP Port Charlotte, FL. 33954

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

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

TITLE ☐ Change ☐ Addition
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/02 (941) 625-9856

Date

Daytime Phone #

CR2E034 (9/01)