

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2002 8:00 am
Secretary of State

05-01-2002 91615 030 ***150.00

DOCUMENT # P99000102557

1. Entity Name

EAGLE BAY CONSTRUCTION AND DEVELOPMENT, INC.

Principal Place of Business

255 EAST DRIVE
 SUITE D
 MELBOURNE FL 32904

Mailing Address

255 EAST DRIVE
 SUITE D
 MELBOURNE FL 32904

2. Principal Place of Business

8310 Big Acorn Cir
 Suite, Apt. #, etc.
 #1001

3. Mailing Address

8310 Big Acorn Cir
 Suite, Apt. #, etc.
 #1001

City & State

Naples, FL

City & State

Naples, FL

4. FEI Number

59-3610868

Applied For

Not Applicable

Zip 34119 Country USA

Zip 34119 Country USA

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PEEPLES, C. PERRY
 8889 PELICAN BAY BLVD.
 SUITE 300
 NAPLES FL 34108

7. Name and Address of New Registered Agent

Name Karen Rosborough
 Street Address (P.O. Box Number is Not Acceptable)
 8310 Big Acorn Cir #1001
 City Naples FL Zip Code 34119

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

(NOTE: Registered Agent signature required when reinstating)

4-16-02
 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	D	<input type="checkbox"/> Delete
NAME	SAUNDRY, KENNETH P JR	
STREET ADDRESS	255 EAST DRIVE, SUITE D	
CITY-ST-ZIP	MELBOURNE FL 32904	
TITLE	D	<input type="checkbox"/> Delete
NAME	BRIDGES, GLENN M	
STREET ADDRESS	255 EAST DRIVE, SUITE D	
CITY-ST-ZIP	MELBOURNE FL 32904	
TITLE	D	<input type="checkbox"/> Delete
NAME	SHEARER, JOHN M	
STREET ADDRESS	255 EAST DRIVE, SUITE D	
CITY-ST-ZIP	MELBOURNE FL 32904	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kenneth P. Saundry, Jr.	
STREET ADDRESS	8310 Big Acorn Cir #1001	
CITY-ST-ZIP	Naples, FL 34119	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Glenn M. Bridges	
STREET ADDRESS	8310 Big Acorn Cir #1001	
CITY-ST-ZIP	Naples, FL 34119	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	John M. Shearer	
STREET ADDRESS	8310 Big Acorn Cir #1001	
CITY-ST-ZIP	Naples, FL 34119	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: Kenneth P. Saundry, Jr.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/18/2002 Daytime Phone #

CR2E034 (9/01)