

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # S33858

1. Entity Name
TEMPLE HOMES OF PINE ISLAND, INC.

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90133 014 ***150.00

Principal Place of Business
16081 TORTUGA STREET
BOKEELIA FL 33922
US

Mailing Address
16081 TORTUGA STREET
BOKEELIA FL 33922
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
16061 TORTUGA ST
Suite, Apt. #, etc.

3. Mailing Address
16061 TORTUGA ST.
Suite, Apt. #, etc.

City & State
BOKEELIA, FL.
Zip 33922 Country LEE

City & State
BOKEELIA, FL.
Zip 33922 Country LEE

4. FEI Number 65-0250725
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
GUY, DOUGLAS R.
16081 TORTUGA ST.
BOKEELIA FL 33922

7. Name and Address of New Registered Agent
Name DOUGLAS R. GUY
Street Address 16061 TORTUGA ST.
City BOKEELIA
FL Zip 33922

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 Douglas R. Guy Pres Douglas R. Guy Pres 4/24/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) 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, 2001 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GUY, DOUGLAS R. 16081 TORTUGA ST. BOKEELIA FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	16061 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	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"/> Delete	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"/> Delete	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"/> Delete	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"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 another like empowered.

SIGNATURE: Douglas R. Guy Pres 4/24/01 941-283-2904
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (10/00)