

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

DOCUMENT # **S52994**

1. Entity Name

Jeanie Buck Realty, Inc.



FILED

04 AUG -9 AM 9:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3600 S. Ocean Shore Blvd

Suite, Apt. #, etc.

3. Mailing Address

10 Whitaker Pl

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Flagler Beach, FL

City & State

Palm Coast, FL

4. FEI Number

59-3081237

Applied For

Not Applicable

Zip

32136

Country

Flagler

Zip

32164

Country

Flagler

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Jeanie Buck

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

10 Whitaker Pl

City

Flagler Beach

FL

Zip Code

321

**DO NOT WRITE
IN THIS SPACE**

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

Jeanie Buck

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

(NOTE: Registered Agent signature required when reinstating)

7-28-04

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

President

NAME

Jeanie Buck

STREET ADDRESS

AS ABOVE

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

Secretary

NAME

Jeanie Buck

STREET ADDRESS

AS ABOVE

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

100040124301
08/12/04--01011--014 **150.00

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

TITLE

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TITLE

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STREET ADDRESS

CITY-ST-ZIP

8/9/9

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Jeanie Buck

Jeanie Buck

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

386-931-2045

Daytime Phone #

CR2E034B (12/02)

7-28-04

Florida Dept. of State
Division of Corporations
Corporate Records
P. O. Box 6327
Tallahassee, FL 32314

To whom it may concern:

Due to Postal Mail Service I did not
receive my notice. The corporation was
formed May 15, 1991 and my number is
552 994.

Thank you.

Sincerely,
Lorrie Buck