## **2000 UNIFORM BUSINESS REPORT (UBR)**

## FILED **DOCUMENT # \$64254** May 08, 2000 8:00 am Secretary of State 1. Entity Name PRESIDENTIAL INVESTMENT, INC. 05-08-2000 90201 029 \*\*\*150.00 Mailing Address Principal Place of Business 3003 TAMIAMI TRAIL NORTH 3003 TAMIAMI TRAIL NORTH SUITE 400 SHITE 400 NAPLES FL 34103-2714 NAPLES FL 34103 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 65-0277724 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BOTOS, MICHAEL E. Street Address (P.O. Box Number is Not Acceptable) 1900 PHILLIPS POINT DRIVE 777 SOUTH FLAGLER DRIVE WEST PALM BEACH FL 33401-6198 City 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. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. П Added to Fees (See criteria on back) $\Box$ Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. XX Change ☐ Addition PD ☐ Delete TITLE TITLE Flood, Thomas J. FLOOD, THOMAS J NAME NAME STREET ADDRESS 3003 TAMIAMI TRAIL N 34103 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL XIX Change ☐ Addition ☐ Delete TITLE Birr, Jeffrey M. BIRR, JEFFREY M NAME 34103 NAME STREET ADDRESS STREET ADDRESS 3003 TAMIAMI TRAIL N CITY-ST-ZIP CITY-ST-ZIP NAPLES FL ☐ Addition ☐ Change DVS □ Delete TITLE TITLE FLORA, TERRY L NAME STREET ADDRESS 3003 TAMIAMI TRAIL NORTH #400 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NAPLES FL 34103 ☐ Change ☐ Addition ☐ Delete TITLE TITLE O'CONNOR, JOHN D NAME NAME 3003 TAMIAMI TRAIL NORTH #400 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NAPLES FL 34103 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE TITLE CORINA, ROBERT D NAME NAME STREET ADDRESS STREET ADDRESS 3003 TAMIAMI TRAIL NORTH #400 NAPLES FL 34103 CITY-ST-ZIP CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP

13. I hereby certify that the information supplied with this filling does not quality 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 OF PRINTED NAME OF SIGNING OFFICEROR DIRECTOR

Terry L. Flora4/20/00

941-261-4455

Daytime Phone #