2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # 266060** Mar 27, 2000 8:00 am **Secretary of State** CANTERBURY APARTMENTS INC 03-27-2000 90116 010 ***150.00 Mailing Address Principal Place of Business % CANTERBURY APT INC % CANTERBURY APT INC 1845 JEFFERSON ST 1845 JEFFERSON ST HOLLYWOOD FL 33020 HOLLYWOOD FL 33020-5405 2. Principal Place of Business 3. Mailing Address Suite, Apt, #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For **NOT APPLICABLE** Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name RCHAMBAULT DIETCHE, JOHN Street Address (P.O. Box Number is Not Acceptable) 1845 JEFFERSON ST APT #6 HOLLYWOOD FL 33020 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 SIGNATI 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. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. TITLE TITLE □ Delete NAME NAME ZUCCO, NICOLE STREET ADDRESS STREET ADDRESS 1845 JEFFERSON ST CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME ARCHEMBAULT, JEAN NAME STREET ADDRESS STREET ADDRESS 1845 JEFFERSON ST. CITY-ST-ZIP CITY-ST-7IP HOLLYWOOD FL 33020 ARCHAMBAULT JEAN 1845 JEFFERSONST. ☐ Addition TITLE Delete TITLE NAME DIETCHE, JOHN NAME STREET ADDRESS STREET ADDRESS 1845 JEFFERSON ST HOLLYWOOD, FL. 33020 CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Change ☐ Delete TITLE Addition NAME HORSLEY, DANIEL NAME STREET ADDRESS 1845 JEFFERSON ST STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL 33020 ☐ Delete Change ☐ Addition TITLE TITLE NAME LEPINE, ROBERT STREET ADDRESS STREET ADDRESS 1845 JEFFERSON ST CITY-ST-ZIP CITY-ST-ZIP HOLLYWOOD FL ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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:

SIGN