

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 05, 2002 8:00 am
Secretary of State

02-05-2002 90107 012 ****61.25

0011976

DOCUMENT # 709998

1. Entity Name

ORLANDO CENTRAL TOWERS, INC.

Principal Place of Business

Mailing Address

**350 EAST JACKSON STREET
ORLANDO FL 32801**

**350 EAST JACKSON STREET
ORLANDO FL 32801**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-6178235

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HAYES, CHAUNCEY

4390-B

4270 LAKE UNDERHILL RD.

ORLANDO FL 32803

Name

Richard V. Platter

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

5001 Gran Lac Avenue

City

Orlando

FL

Zip Code
32812

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

Richard V. Platter

January 11, 2002

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** ☐ Delete
NAME **SMITH, GEORGE E**
STREET ADDRESS **9717 KILGORE ROAD**
CITY-ST-ZIP **ORLANDO FL 32819**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **CUMMINS, JIM**
STREET ADDRESS **798 CLEAR LAKE ROAD**
CITY-ST-ZIP **COCOA FL 32922**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **PD** ☐ Delete
NAME **KAUFFMAN, ELMER H**
STREET ADDRESS **4300 OLD DOMINION RD**
CITY-ST-ZIP **ORLANDO FL 32806**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **TD** ☐ Delete
NAME **WARREN, LOUIS**
STREET ADDRESS **4197 DERBY ST**
CITY-ST-ZIP **OVIDO FL 32765**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **VICKERS, DOUGLAS**
STREET ADDRESS **409 PALMETTO ST.**
CITY-ST-ZIP **OVIDO FL 32765**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **SD** ☐ Delete
NAME **CLEMENTS, RANDY**
STREET ADDRESS **1753 MARSH RD.**
CITY-ST-ZIP **OVIDO FL 32765**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

George E. Smith
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-15-2002

407 423 2148

Date

Daytime Phone #

CR2E037 (9/01)