

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 715510

1. Entity Name

C.T.A. RIVER APARTMENTS, INC.

FILED
May 15, 2000 8:00 am
Secretary of State

05-15-2000 90297 013 ****61.25

Principal Place of Business

Mailing Address

4505 NORTH ROME AVENUE
TAMPA FL 33603
US

4505 NORTH ROME AVENUE
TAMPA FL 33603-2844
US

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

59-1371756

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

WILSON, TERRANCE J
5109 RIVER BOULEVARD
TAMPA FL 33603

Name

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

City

FL

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

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 VC ☒ Delete
NAME DIAZ, PEGGY
STREET ADDRESS 3107 ARCH STREET WEST
CITY-ST-ZIP TAMPA FL

TITLE VP ☐ Change ☒ Addition
NAME Lyons, Yvonne
STREET ADDRESS 503 Lantern Circle
CITY-ST-ZIP Temple Terrace, FL 33617

TITLE S ☐ Delete
NAME WILSON, TERRANCE J.
STREET ADDRESS 5109 RIVER BLVD.
CITY-ST-ZIP TAMPA FL

TITLE P ☒ Change ☐ Addition
NAME Wilson, Terrance J.
STREET ADDRESS 5109 River Blvd.
CITY-ST-ZIP Tampa, FL 33603

TITLE D ☒ Delete
NAME BRUMMOND, TONI
STREET ADDRESS 5119 CORVETTE DR
CITY-ST-ZIP TAMPA FL 3362

TITLE ST ☐ Change ☒ Addition
NAME Boyd, Marjorie
STREET ADDRESS 518 Sportsman Park Drive
CITY-ST-ZIP Seffner, FL 33584

TITLE D ☒ Delete
NAME GRANT, SANDRA
STREET ADDRESS 6405 WALTON WAY
CITY-ST-ZIP TAMPA FL 33610

TITLE D ☐ Change ☒ Addition
NAME Kiker, Charles
STREET ADDRESS 2813 Harder Oaks
CITY-ST-ZIP Valrico, FL 33594

TITLE C ☒ Delete
NAME NORWOOD, WILLIE L
STREET ADDRESS 9858 GILCHRIST DRIVE
CITY-ST-ZIP SEFFNER FL 33584

TITLE D ☐ Change ☒ Addition
NAME Frierson - Cousin, Rachelle
STREET ADDRESS 3936 Bayview Avenue
CITY-ST-ZIP Tampa, FL 33611

TITLE D ☒ Delete
NAME BREEDEN, BRENDA
STREET ADDRESS 12123 RIVER HILLS DRIVE
CITY-ST-ZIP TAMPA FL 33617

TITLE D ☐ Change ☒ Addition
NAME Crosson, Carl
STREET ADDRESS 1708 Woodbine Drive
CITY-ST-ZIP Brandon, FL 33510

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:

Terrance J. Wilson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Terrance J. Wilson

4/25/00

(813) 238-7902

Date

Daytime Phone #

CR2E037 (9/99)