

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2001 8:00 am
Secretary of State

03-19-2001 90031 041 ****61.25

DOCUMENT # 721551

1. Entity Name

CHATEAU-BY-THE-SEA, INC.

Principal Place of Business

3663 S. ATLANTIC AVENUE
 NEW SMYRNA BEACH FL 32169

Mailing Address

3663 S. ATLANTIC AVENUE
 NEW SMYRNA BEACH FL 32169

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

59-1410730

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

TRICKEL, KENT
4715 HALL ROAD
ORANGE FL 32817

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
P
FREDDA, VICTOR ☐ Delete
4015 LAKE MIRA DR
ORLANDO FL 32817

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☐ Change ☒ Addition
Amy C. Story
1771 Killarney Dr.
Winter Park, FL 32789

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
V ☐ Delete
GEMSCH, MARCUS
1281 SEYBOLD TERRACE
DELTONA FL 32725

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☐ Change ☒ Addition
Marian A. Floyd
1475 Dodd Rd.
Winter Park, FL 32792

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
T ☐ Delete
RICHARD, HARRY
351 LAKE RD
MAITLAND FL 32751

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
S ☐ Delete
TRICKEL, KENT
4715 HALL RD
ORLANDO FL 32817

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☒ Delete
SIEWIOREK, GREG
4729 INNISBROOK CT., N.
ELKTON FL 32033

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D ☐ Delete
DANCE, HELEN
10010 MCCORMICK PL
KNOXVILLE TN 37923

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

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:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/01
 Date

407 671-6643
 Daytime Phone #

CR2E037 (10/00)