

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 727252

1. Entity Name

WEKIVA VILLAS, INC.

FILED
Apr 19, 2000 8:00 am
Secretary of State

04-19-2000 90102 015 ****61.25

Principal Place of Business

Mailing Address

238 N WESTMONTE DR
SUITE 280
ALTAMONTE SPRGS FL 32714
US

PO BOX 160386
ALTAMONT SPRINGS FL 32716-0386
US

2. Principal Place of Business

3. Mailing Address

225 S. Westmonte Drive

P.O. Box 161606

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 2050

City & State

City & State

Altamonte Springs, FL

Altamonte Springs, FL

4. FEI Number

59-1534601

Applied For

Not Applicable

Zip

Country

32714

USA

Zip

Country

327161-1606

USA

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

PFAUSER, MARGO

238 N WESTMONTE DR

STE 105

ALTAMONTE SPRGS FL 31714

Name

Margo A. Pfauter

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

225 S. Westmonte Drive

Suite 2050

City

Altamonte Springs

FL

Zip Code

32714

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

Margo A Pfauter Margo A Pfauter 4-10-2000

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 DVP ☒ Delete
NAME ALBIN, YVETTE
STREET ADDRESS 200 TOMOKA TRL
CITY-ST-ZIP LONGWOOD FL 32779

TITLE DP Howard, Karen ☐ Change ☒ Addition
NAME 211 Tomoka Trail
STREET ADDRESS Longwood, FL 32779
CITY-ST-ZIP Director ☒ Change ☐ Addition

TITLE PD ☐ Delete
NAME DAVIS, PAMELA H
STREET ADDRESS 204 TOMOKA TRAIL
CITY-ST-ZIP LONGWOOD FL 32779

TITLE D ☐ Delete
NAME WHITFIELD, SHERWIN
STREET ADDRESS 118 TOMOKA TR
CITY-ST-ZIP LONGWOOD FL 32779

TITLE D ☐ Delete
NAME SUMMERS, JEFFREY
STREET ADDRESS 127 TOMOKA TRAIL
CITY-ST-ZIP LONGWOOD FL 32779

TITLE D/T Dubrovillet Cynthia ☐ Change ☒ Addition
NAME 114 Tomoka Trail
STREET ADDRESS Longwood, FL 32779
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Steven F. K. K...
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)