

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 16, 2001 8:00 am**  
**Secretary of State**

03-16-2001 90035 003 \*\*\*150.00

0570831

**DOCUMENT # J72309**

1. Entity Name  
**VALENCIA PROPERTIES, INC.**

Principal Place of Business  
**P.O. BOX 58717**  
**SALT LAKE CITY UT 84158-0717**  
**US**

Mailing Address  
**P.O. BOX 58717**  
**SALT LAKE CITY UT 84158-0717**  
**US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
**255 S. Orange Ave**

3. Mailing Address  
**255 S. Orange Ave.**

Suite, Apt. #, etc.  
**#1255**

Suite, Apt. #, etc.  
**#1255**

City & State  
**Orlando, FL**

City & State  
**Orlando, FL**

4. FEI Number **59-2808258**

Applied For  
 Not Applicable

Zip  
**32801**

Country  
**USA**

Zip  
**32801**

Country  
**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

**BEVERLEY, WILLIAM A**  
**255 S. ORANGE AVENUE**  
**STE 1255**  
**ORLANDO FL 32801**

Name  
**MARY B. SHARP**

Street Address (P.O. Box Number is Not Acceptable)  
**255 S. Orange Ave.**

**#1255**

City  
**Orlando**

**FL**

Zip Code  
**32801**

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 *Mary B. Sharp*

**MARY B. SHARP**

**2-19-01**

Signature, type or print name of registered agent and title if applicable.

(NOTE: Registered agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **STD**  Delete  
 NAME **JENNIFER TOBLER**  
 STREET ADDRESS **3069 E CARRIGAN CANYON DR**  
 CITY-ST-ZIP **SALT LAKE CITY UT**

TITLE **President**  Change  Addition  
 NAME **Mary B. Sharp**  
 STREET ADDRESS **255 S. Orange Ave. #1255**  
 CITY-ST-ZIP **Orlando, FL 32801**

TITLE **PD**  Delete  
 NAME **PETERSON, MARILYN H**  
 STREET ADDRESS **3069 E CARRIGAN DR.**  
 CITY-ST-ZIP **SALT LAKE CITY UT**

TITLE **Secretary/Treasurer**  Change  Addition  
 NAME **Michelle H. Brown**  
 STREET ADDRESS **255 S. Orange Ave #1255**  
 CITY-ST-ZIP **Orlando, FL 32801**

TITLE **D**  Delete  
 NAME **HAMILTON, FINLEY M.**  
 STREET ADDRESS **3069 E CARRIGAN CANYON DR.**  
 CITY-ST-ZIP **SALT LAKE CITY UT**

TITLE **VP**  Change  Addition  
 NAME **Finley M. Hamilton**  
 STREET ADDRESS **255 S. Orange Ave. #1255**  
 CITY-ST-ZIP **Orlando, FL 32801**

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

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: *Mary B. Sharp*

**MARY B. SHARP**

Date

Daytime Phone #

**407-835**

**2/3/01 0016**

CR2E034 (10/00)