

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N12489

1. Entity Name

THE COACH HOMES AT MARINERS' VILLAGE CONDOMINIUM

Principal Place of Business

Mailing Address

PO BOX 568846  
ORLANDO FL 32856  
US

PO BOX 568846  
ORLANDO FL 32856-8846  
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

59-2775739

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

HILLMAN, RANDY  
203 E. HILLCREST STREET  
ORLANDO FL 32801

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 D  
NAME HAMILTON, ROBERT JR  
STREET ADDRESS 4806-3 COACHMAN'S DR  
CITY-ST-ZIP ORLANDO FL ☐ Delete

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

TITLE PD  
NAME HAMILTON, ROBERT, III  
STREET ADDRESS 4700-9 BUGGY WHIP LANE  
CITY-ST-ZIP ORLANDO FL ☐ Delete

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

TITLE D  
NAME WATSON, SARA  
STREET ADDRESS 2392-8 BRIDLE PATH LANE  
CITY-ST-ZIP ORLANDO FL ☐ Delete

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

TITLE SD  
NAME WEILER, ROSE  
STREET ADDRESS 4807-6 COACHMAN'S DRIVE  
CITY-ST-ZIP ORLANDO FL ☒ Delete

TITLE ☐ Change ☒ Addition  
NAME mike monnell  
STREET ADDRESS 2418-3 Coach House Blvd  
CITY-ST-ZIP ORLANDO, Florida 32806

TITLE D  
NAME FREEMAN, WILLIAM  
STREET ADDRESS 2211-2 COACH HOUSE BLVD  
CITY-ST-ZIP ORLANDO FL ☐ Delete

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

TITLE D  
NAME GUZMAN, MIRIAM  
STREET ADDRESS 4813-3 COACHMAN'S DR  
CITY-ST-ZIP ORLANDO FL ☐ Delete

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:

*Robert Hamilton Jr*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*April 30, 2000*  
Date

Daytime Phone #

FILED  
May 04, 2000 8:00 am  
Secretary of State

05-04-2000 90225 020 \*\*\*\*61.25

004138



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)