

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N18754

1. Entity Name

ORLANDO CORPORATE CENTER PROPERTY OWNERS ASSOCIA

FILED
May 16, 2001 8:00 am
Secretary of State

05-16-2001 90392 017 ****70.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business

4105-A 34TH STREET
ORLANDO FL 32811

Mailing Address

4105-A 34TH STREET
ORLANDO FL 32811

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2892792

Applied For

Not Applicable

Zip

Country

Zip

Country

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

SULLIVAN, CHARLES
4105-A 34TH STREET
ORLANDO FL 32811

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 PD
NAME SULLIVAN, CHARLES
STREET ADDRESS 4105-A 34TH STREET
CITY-ST-ZIP ORLANDO FL 32811 ☐ Delete

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

TITLE VSTD
NAME CHAMBERLAIN, DEBORAH
STREET ADDRESS 4105-A 34TH STREET
CITY-ST-ZIP ORLANDO FL 32811 ☐ Delete

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

TITLE D
NAME FREDERICK, JOHN
STREET ADDRESS 4105-A 34TH STREET
CITY-ST-ZIP ORLANDO FL 32811 ☐ Delete

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

TITLE D
NAME LANDS, LUKE
STREET ADDRESS 4105-A 34TH STREET
CITY-ST-ZIP ORLANDO FL 32811 ☐ Delete

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

TITLE D
NAME MONTROYA, HECTOR
STREET ADDRESS 4105-A 34TH STREET
CITY-ST-ZIP ORLANDO FL 32811 ☐ Delete

TITLE Denise Musil
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

Charles Sullivan 4-5-01 813/612-4000

CR2E037 (10/00)