

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000009638

1. Entity Name

WORLDWIDE LEISURE, INC.

FILED

00 MAY -1 PM 4:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

DEBEAUBIEN DR
FL 328357685 DEBEAUBIEN DR
ORLANDO FL 32835-8127
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

8669 Commodity Cir

8669 Commodity Cir

Suite, Apt. # etc.

Suite, Apt. # etc.

Attn: Tom Avallone

Attn: Tom Avallone

City & State
Orlando, FLCity & State
Orlando, FL

Zip

Zip

32819

32819

Country USA

Country USA

4. FEI Number

59-3176384

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

Name

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

City

FL

Zip Code

MARSHALL, BYRD F JR.
201 EAST PINE ST.
SUITE 1200
ORLANDO FL 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when revoking)

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. 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	DP	☐ Delete
NAME	EARL, ROBERT I	
STREET ADDRESS	7685 DEBEAUBIEN DR	
CITY-ST-ZIP	ORLANDO FL 32835	

TITLE	DP	☒ Change ☐ Addition
NAME	EARL, ROBERT I	
STREET ADDRESS	8669 Commodity Circle	
CITY-ST-ZIP	Orlando, FL 32819	

TITLE	DST	☒ Delete
NAME	ROSENBERG, DAVID J	
STREET ADDRESS	7685 DEBEAUBIEN DR	
CITY-ST-ZIP	ORLANDO FL 32835	

TITLE	DST	☐ Change ☒ Addition
NAME	Avallone, Thomas	
STREET ADDRESS	8669 Commodity Circle	
CITY-ST-ZIP	Orlando, FL 32819	

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		

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 and all other like empowered.

SIGNATURE:

Robert Earl

4/ 12000

407-352-6886

TOTAL P.06