

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Apr 21, 2000 08:00 AM****Secretary of State****DOCUMENT # P94000054956****1. Entity Name**

RESIDENTIAL COMMUNITIES MANAGEMENT, INC.

Principal Place of Business500 N MAITLAND AVE
STE 203
MAITLAND
32751

FL

US

Mailing Address500 N MAITLAND AVE
STE 203
MAITLAND
32751

US

FL

2. Principal Place of Business

600 GOLFPARK DRIVE

3. Mailing Address

600 GOLFPARK DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

CELEBRATION

FL

Zip
34747Country
US**City & State**

CELEBRATION

FL

Zip
34747Country
US**4. FEI Number**

59-3273264

Applied For

Not Applicable

5. Certificate of Status Desired☐**\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent**COLLING LEE JAY
500 N MAITLAND AVE
STE 203
MAITLAND
32751

FL

US

7. Name and Address of New Registered Agent**Name**

COLLING LEE JAY

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

1920 E. ROBINSON STREET

City
ORLANDO

FL

Zip Code
32803**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 LEE JAY COLLING**

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

(NOTE: Registered Agent signature required when reinstating)

04/21/2000

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 State****10. Election Campaign Financing
Trust Fund Contribution.** ☐**\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	PD		☐ Delete
NAME	SIMPSON	MARTYN W	
STREET ADDRESS	600 GOLFPARK DR		
CITY-ST-ZIP	CELEBRATION FL 34747		

TITLE	VPSD		☐ Delete
NAME	COLLING	LEE JAY	
STREET ADDRESS	2023 VENETIAN WAY		
CITY-ST-ZIP	WINTER PARK FL		

TITLE			☐ Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			☐ Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			☐ Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

TITLE			☐ Delete
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD		☒ Change	☐ Addition
NAME	SIMPSON	MARTYN W		
STREET ADDRESS	600 GOLFPARK DR			
CITY-ST-ZIP	CELEBRATION FL 34747			

TITLE	VPSD		☒ Change	☐ Addition
NAME	COLLING	LEE JAY		
STREET ADDRESS	2023 VENETIAN WAY			
CITY-ST-ZIP	WINTER PARK FL 32789			

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

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

TITLE			☐ Change	☐ Addition
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: MARTYN W. SIMPSON****PD: 04/21/2000**