

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000008325

1. Entity Name
FRENCHMAN'S CREEK REALTY, INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90371 006 ***150.00

Principal Place of Business 13495 TOURNAMENT DRIVE PALM BEACH GARDENS FL 33410	Mailing Address 13495 TOURNAMENT DRIVE PALM BEACH GARDENS FL 33410-1204
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

4. FEI Number 65-0580680	Applied For <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**MCCRACKEN, JOHN B
JONES, FOSTER, JOHNSTON & STUBBS
505 S FLAGLER DRIVE, 11TH FLOOR
WEST PALM BEACH FL 33402**

7. Name and Address of New Registered Agent

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 _____ (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, 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		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD	<input type="checkbox"/> Delete	TITLE D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SPIRA, SEYMOUR		NAME Seymour Spira	
STREET ADDRESS 3819 TOULOUSE DRIVE		STREET ADDRESS 3280 Monet Drive West	
CITY-ST-ZIP PALM BCH GARDENS FL 33410		CITY-ST-ZIP Palm Beach Gardens, FL 33410	
TITLE D	<input checked="" type="checkbox"/> Delete	TITLE PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME FREEDMAN, SOL		NAME George Murphy	
STREET ADDRESS 3810 LIMOGES LN		STREET ADDRESS 13839 Le Mans Way	
CITY-ST-ZIP PALM BCH GARDENS FL 33410		CITY-ST-ZIP Palm Beach Gardens, FL 33410	
TITLE D	<input checked="" type="checkbox"/> Delete	TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME LOVLER, ADOLPH		NAME Allan Mitchell	
STREET ADDRESS 2880 LE BATEAU DRIVE		STREET ADDRESS 13315 Provence Drive	
CITY-ST-ZIP PALM BEACH GARDENS FL 33410		CITY-ST-ZIP Palm Beach Gardens, FL 33410	
TITLE D	<input checked="" type="checkbox"/> Delete	TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME KAY, MILLARD		NAME Howard Wiener	
STREET ADDRESS 13750 PARC DRIVE		STREET ADDRESS 13245 Verdun Drive	
CITY-ST-ZIP PALM BEACH GARDENS FL 33410		CITY-ST-ZIP Palm Beach Gardens, FL 33410	
TITLE D	<input type="checkbox"/> Delete	TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME SINGER, LLOYD		NAME Jack Holsten	
STREET ADDRESS 13236 VERDUN DR		STREET ADDRESS 13717 Rivoli Drive	
CITY-ST-ZIP PALM BEACH GARDEN FL 33410		CITY-ST-ZIP Palm Beach Gardens, FL 33410	
TITLE D	<input checked="" type="checkbox"/> Delete	TITLE D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME CLICK, MORRIE		NAME Don Brown	
STREET ADDRESS 13345 PROVENCE DR		STREET ADDRESS 2667 Marseilles Drive	
CITY-ST-ZIP PALM BEACH GARDENS FL 33410		CITY-ST-ZIP Palm Beach Gardens, FL 33410	

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: *George Murphy* **4/29/00** **627-1467**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/99)