

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 23, 2001 8:00 am
Secretary of State

05-23-2001 91164 024 ***158.75

771028

DO NOT WRITE IN THIS SPACE

DOCUMENT # 361830

1. Entity Name
 POINCIANA NEW TOWNSHIP INC.

Principal Place of Business **Mailing Address**

2. Principal Place of Business **3. Mailing Address**
 201 Alhambra CIRCLE PO BOX 026000

Suite, Apt. #, etc. Suite, Apt. #, etc.
 12th Floor

City & State City & State
 Coral Gables, FL Miami, FL

Zip Country Zip Country
 33134 33102

4. FEI Number Applied For
 59-1288187 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 **Kerrigan, Juanita I.**
 Street Address (P.O. Box Number is Not Acceptable)
 201 Alhambra Circle
 12th Floor
 City **Coral Gables, FL** Zip Code **33134**

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

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. **FILE NOW!! FEE IS \$150.00 After MAY 1, 2001 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	<input type="checkbox"/> Delete
NAME	McNairy, Charles L.	
STREET ADDRESS	201 Alhambra Circle, 12th Floor	
CITY-ST-ZIP	Coral Gables, FL 33134	
TITLE	VD	<input type="checkbox"/> Delete
NAME	Getman, Dennis J.	
STREET ADDRESS	201 Alhambra Cir., 12th Floor	
CITY-ST-ZIP	Coral Gables, FL 33134	
TITLE	SD	<input type="checkbox"/> Delete
NAME	Kerrigan, Juanita I.	
STREET ADDRESS	201 Alhambra Cir., 12th Fl	
CITY-ST-ZIP	Coral Gables, FL 33134	
TITLE	T	<input type="checkbox"/> Delete
NAME	Rama, Michael	
STREET ADDRESS	201 Alhambra Cir., 12th Floor	
CITY-ST-ZIP	Coral Gables, FL 33134	
TITLE	V	<input type="checkbox"/> Delete
NAME	Raymond, Warren	
STREET ADDRESS	201 Alhambra Circle, 12th Floor	
CITY-ST-ZIP	Coral Gables, FL 33134	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 I am the corporation or the receiver or trustee empowered to execute this report or changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Juanita I. Kerrigan* *Secretary* *4/19/01* *(305) 442-7000*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #
JUANITA I. KERRIGAN

CR2E034 (11/00)