2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 231450 1. Entity Name

LOST TREE VILLAGE CORPORATION

Principal Plac	e of Business	Mailing Address			1					
3300 PGA BLVD SUITE 805 PALM BEACH GARDENS FL 33410		3300 PGA BLVD SUITE 905 PALM BEACH GARDENS FL 33410-2811								
								ALAD ALAH AR		
2. Principal Place of Business		3. Mailing Address								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. 1	4. FE) Number 59-0947833			Applied For Not Applicable	
Zip Country		Zip Country		5.				8.75 Additional		
	6. Name and Address of Current R	egistered Agent	<u> </u>		7. 1	Name and Address of New Reg				1
	U. Name and Address of Current	egiatorea Agent		Name				<u> </u>		1
STONE, HELEN E			_	Street Address (P.O. Box Number is Not Acceptable)						1
3300	PGA BLVD., STE 805			dieer Addiess (F.O. Box Number is Not Acceptable)						
PALI	M BEACH GARDENS FL 33410									
				City			FL	Zip Cod	e	
8. The above	named entity submits this statement for	the purpose of changing its	registere	d office or	registered ag	ent, or both, in the State of Florid	a.	•		1
					Ü					
SIGNATURE .										
SIGNATORIE ,	Signature, typed or printed name of registered agent an	d title if applicable. (NOT	E: Registered	Agent signatu	re required when re	einstating)	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			50.00	10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees				
11. OFFICERS AND						LODITIONS/CHANGES TO OFFICE	BS AND	DIRECTOR	S IN 11	1
TITLE	VD OFFICERS AND D	Delete	TITLE		AS	DOTTION BY OF BUILDING		Change	Addition	1 8
NAME	SHAFFER-BIGGS, MARGARET	L Delete	NAME			Tilara		-		9
STREET ADDRESS	3300 PGA BLVD., STE 805		STREE	T ADDRESS		PGA Blvd, Suite	- 805	5		8
CITY-ST-ZIP	PALM BEACH GARDENS FL 3341	0	CITY-	ST-ZIP		Beach Gardens,] }
TITLE	D	☐ Delete	TITLE		P			Change	☐ Addition	3
NAME	REYNOLDS, JOHN D		NAME			, Charles M. J:				
STREET ADDRESS	3300 PGA BLVD., STE 805			T ADDRESS ST-ZIP		PGA Blvd, Suite				
CITY-ST-ZIP	PALM BEACH GARDENS F 33410				Palm	Beach Gardens,	FL 3	33410	☐ Addition	1
TITLE	AS	Delete	TITLE NAME				•	- Change	☐ Addition	
NAME STREET ADDRESS	YWAN, TILARA E 3300 PGA BLVD., STE 805			T ADDRESS						
CITY-ST-ZIP	PALM BEACH GARDENS FL 3341	n		ST-ZIP						
TITLE	STD	U Delete	TITLE				_	☐ Change	☐ Addition	1
NAME	REYNOLDS, SHEILA B	□ Délére	NAME							
STREET ADDRESS	3300 PGA BLVD., STE 805			T ADDRESS						1
CITY-ST-ZIP	PALM BEACH GARDENS FL 3341	0	CITY-	ST-ZiP						_
TITLE	P	Delete	TITLE					Change	Addition	
NAME	BYER, CHARLES M JR.	••	NAME							
STREET ADDRESS	3300 PGA BLVD., STE 805		STREE	T ADDRESS						
CITY-ST-ZIP	PALM BEACH GARDENS FL 3341	0	CITY-	ST-ZIP						

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

ZERBOCK, LAURA M

3300 PGA BLVD., STE 805

Delete

☐ Change

☐ Addition

FILED

Apr 18, 2000 8:00 am Secretary of State

04-18-2000 90835 001 ***600.00

PALM BEACH GARDENS FL 33410 13. Thereby 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.