2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2000 8:00 am
Secretary of State
03-07-2000 90063 022 ***150.00

DOCUMENT # 238366

1. Entity Name

THE WINTER HAVEN CORPORATION

Principal Place of Business	Mailing Address
3751 NE 27TH AVE LIGHTHOUSE POINT FL 33064 US	PO BOX 5700 LIGHTHOUSE POINT FL 33074-5700 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
3751 NE 27th Ave.	P. O. Box 5700
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Lighthouse Point, FL	City & State: Lighthouse Point, FL
Zip: 33064 Country: USA	Zip: 33074-5700 Country: USA

4. FEI Number 59-6078844 ☐ 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
HAASS, STEPHEN A 3751 N.E. 27TH AVE LIGHTHOUSE POINT FL 33064	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 _____ DATE
/ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KLIBER, R. J. 720 N. OXFORD RD. GROSSE P WOODS MI	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ANGELL, PHILIP S. 420 FORELANDS RD. ANNAPOLIS MD	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD HAASS, STEPHEN A 3751 N.E. 27TH AVE LIGHTHOUSE POINT FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD BAUMAN, SUZANNE P. 339 AUSTRALIAN AVENUE PALM BEACH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD COOPER, WILLIAM S. 12927 GUACAMAYO CT. SAN DIEGO CA	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E034 (9/99)

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.

313-343-8860

SIGNATURE: Ralph Kliber RALPH J. KLIBER PRESIDENT 3/6/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #