

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 03, 2001 8:00 am**  
**Secretary of State**

04-03-2001 90060 033 \*\*\*150.00

0357007

**DOCUMENT # 338659**

1. Entity Name

**REGENCY HEIGHTS FOR MOBILE HOMES, INC.**

Principal Place of Business

570 TALLAHASSEE DR., N.E.  
 ST. PETERSBURG FL 33702

Mailing Address

570 TALLAHASSEE DR., N.E.  
 ST. PETERSBURG FL 33702

2. Principal Place of Business

2550 Highway 580 East

3. Mailing Address

2550 Highway 580 East

Suite, Apt. #, etc.

Park Office

Suite, Apt. #, etc.

Park Office

City & State

Clearwater, FL

City & State

Clearwater, FL

4. FEI Number

33-8659621

Applied For

Not Applicable

Zip

33761

Country

USA

Zip

33761

Country

USA

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

ERICSON, HARDY  
 570 TALLAHASSEE DR., N.E.  
 ST. PETERSBURG FL 33702

7. Name and Address of New Registered Agent

Name  
**LARRY BATTIS**

Street Address (P.O. Box Number is Not Acceptable)  
**4308 Live Oak Boulevard**

City  
**Palm Harbor**

FL

Zip Code  
**34685**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

*Larry Battis*

*3/22/01*

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, 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Delete
PD	ERICSON, HARDY	570 TALLAHASSEE DR NE	ST PETERSBURG, FL 00000	<input checked="" type="checkbox"/>
<del>SD</del> TD	BATTIS, LARRY	<del>2100 CENTERVIEW CT</del> 4308 Live Oak Blvd.	<del>CLEARWATER, FL</del> Palm Harbor, FL 34685	<input type="checkbox"/>
VD	BABCOCK, CHRISTINE	1866 BRIGHTWATER BLVD	ST PETERSBURG FL	<input checked="" type="checkbox"/>
SD	<del>SAVERS, MARJORIE</del> AUCREMANN, MARJORIE S.	830 N SHORE DR NE, SUITE 7D	ST PETERSBURG, FL 00000 33701	<input type="checkbox"/>
PD	SWEET, STEVEN	9926 Sublette Avenue	Orlando, FL 32836	<input type="checkbox"/>
VD	VIANO, NETIA ANN	BOX 51	NORTH, ILLINOIS 61553	<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
VD	SMOKER, BEVERLY	637 Tallahassee Drive NE	St. Petersburg, FL 33702	<input type="checkbox"/>	<input type="checkbox"/>
VD	SWEET, GLORIA	4977 Oxford Avenue North	St. Petersburg, FL 33710	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*Larry Battis*

*3/22/01*

Date

Daytime Phone #

*727-996-1364*

CR2E034 (10/00)