

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 356096

1. Entity Name

PALM COAST INC

FILED
May 01, 2000 8:00 am
Secretary of State

05-01-2000 90452 049 ***150.00

Principal Place of Business

Mailing Address

EXECUTIVE OFFICE
1 CORPORATE DRIVE
PALM COAST FL 32151

EXECUTIVE OFFICE
1 CORPORATE DRIVE
PALM COAST FL 32137-4716

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1366342

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

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

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

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

(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 ☐ Delete
NAME TD
STREET ADDRESS CALLEA, CHARLES J
CITY-ST-ZIP 1 CORPORATE DR
PALM COAST FL

TITLE ☐ Change ☒ Addition
NAME AS
STREET ADDRESS WILSON, ARLENE
CITY-ST-ZIP 1 CORPORATE DR.
PALM COAST, FL 32137

TITLE ☐ Delete
NAME AS
STREET ADDRESS GARD, VICTORIA P
CITY-ST-ZIP 1 CORPORATE DR.
PALM COAST FL 32151

TITLE ☐ Change ☒ Addition
NAME V
STREET ADDRESS KELLY, JOHN V.
CITY-ST-ZIP 1 CORPORATE DR.
PALM COAST, FL 32137

TITLE ☐ Delete
NAME PD
STREET ADDRESS GARDNER, JAMES E.
CITY-ST-ZIP Q CORPORATE DR
PALM COAST FL

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Delete
NAME V
STREET ADDRESS BOLCAR, SANDRA
CITY-ST-ZIP 1086 TEANECK ROAD
TEANECK NJ

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME S
STREET ADDRESS CUFF, ROBERT G., JR.
CITY-ST-ZIP EXECUTIVE OFFICES, 1 CORPORATE DRIVE
PALM COAST FL

TITLE ☒ Change ☐ Addition
NAME VS
STREET ADDRESS CUFF, ROBERT G.
CITY-ST-ZIP 1 CORPORATE DR.
PALM COAST, FL 32137

TITLE ☒ Delete
NAME V
STREET ADDRESS AVERY, GORDON
CITY-ST-ZIP 777 OLD SAW MILL RD SUITE 260
TARRYTOWN NY 10591-6726

TITLE ☐ Change ☐ 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 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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
JAMES E. GARDNER

4/27/00

Date

904/4452642

Daytime Phone #

CR2E034 (9/99)