

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 466330

1. Entity Name

COLONY PARK MOBILE HOME VILLAGE, INC.

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90048 036 ***150.00

Principal Place of Business

Mailing Address

6720 MANGROVE DR
MERRITT ISLAND FL 32953
US

6720 MANGROVE DR
MERRITT ISLAND FL 32953-6849
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-1809406

Applied For
Not Applicable

Zip

Country

Zip

Country

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

WARREN, ROBERT J
703 N. MAIN STREET
STE. C
GAINESVILLE FL 32601

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 PT ☐ Delete
NAME WARREN, LENORE
STREET ADDRESS 281 W. GRANDVIEW HEIGHTS
CITY-ST-ZIP BOONE NC 28607

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

TITLE D ☐ Delete
NAME WILLIAM, WARREN
STREET ADDRESS 1447 NEWFOUND HARBOR DR
CITY-ST-ZIP MERRITT ISLAND FL 32952

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

TITLE V ☐ Delete
NAME KENDALL, CAROL
STREET ADDRESS 1435 NEWFOUND HARBOUR DR.
CITY-ST-ZIP MERRITT ISLAND FL 32952

TITLE ☒ Change ☐ Addition
NAME Kendall, Carol
STREET ADDRESS 895 Palmetto street
CITY-ST-ZIP Oviedo, FL 32765

TITLE S ☐ Delete
NAME WARREN, ROBERT J
STREET ADDRESS 703 N. MAIN STREET
CITY-ST-ZIP GAINESVILLE FL 32601

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Robert J. Warren 4/17/00 352-377-4411

CR2E034 (9/99)