

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

03 SEP -2 PM 12:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

0127643 AT

DOCUMENT # 505561

1. Entity Name
DEBOARD CORPORATION



Principal Place of Business
529 S SUMMERLIN AVE
ORLANDO FL 32801
US

Mailing Address
P.O. BOX 1452
ORLANDO FL 32802
US



2. Principal Place of Business
635 N HYER ST
Suite, Apt. #, etc.

3. Mailing Address
635 N HYER ST
Suite, Apt. #, etc.

☐ CHECK HERE IF MAKING CHANGES

City & State
ORLANDO FL
Zip
32803
Country
US

City & State
ORLANDO FL
Zip
32803
Country
US

4. FEI Number 59-1687088

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DEBOARD, ROBERT W
529 S SUMMERLIN AVE
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name MATTHEW G DEBOARD
Street Address (P.O. Box Number is Not Acceptable)
3910 FINCH ST
City ORLANDO FL Zip Code 32803

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$550.00
After September 10, 2003 Fee will be \$750.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEBOARD, DAVID G 2460 PEBGHTREE RD ATLANTA GA 30305	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DEBOARD, ROBERT W 529 S SUMMERLIN AVE ORLANDO FL 32801	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT MATTHEW G DEBOARD 3910 FINCH ST ORLANDO FL 32803	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VICE PRESIDENT LAVOY KEITH PANGLE 13148 ROYAL FERN DR. ORLANDO FL 32828	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 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

8-18-03

Date

Daytime Phone #

CR2E034 (4/03)

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **505561**

1. Entity Name
DEBOARD CORPORATION



Principal Place of Business
**529 S SUMMERLIN AVE
ORLANDO FL 32801
US**

Mailing Address
**P.O. BOX 1452
ORLANDO FL 32802
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1687088**

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

**DEBOARD, ROBERT W
529 S SUMMERLIN AVE
ORLANDO FL 32801**

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. I am familiar with and accept the obligations of registered agent.

SIGNATURE

Signature of person providing names of registered agent and file preparer

(NOTE: Registered Agent signature required when consolidating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
	D	DEBOARD, DAVID G	2460 PEBBLETREE RD	ATLANTA GA 30305	<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>
	PO	DEBOARD, ROBERT W	529 S SUMMERLIN AVE	ORLANDO FL 32801	<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"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-28-03

DATE

Signature Page 4

Vintage

Realty of Orlando

August 18, 2003

Florida Secretary of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

Re: Enclosed UBR

To Whom it May Concern,

Enclosed please find our second UBR. We filed timely the first UBR (copy enclosed), but our check never cleared, and we presume it never reached your offices. Shortly after we filed the original UBR, we moved offices and have just discovered the situation.

Therefore, we are filing the second UBR with updated information. We are asking for relief from the penalties involved as we did file timely.

Your help in this matter will be greatly appreciated, and if you have any further questions, please contact us at 407-841-7230.

Sincerely,



Matthew G. DeBoard
President