

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 16, 2001 8:00 am
Secretary of State
 05-16-2001 90386 032 ***150.00

DOCUMENT # 52558

1. Entity Name
 Soundview Woods, Inc.

Principal Place of Business Mailing Address

2. Principal Place of Business **3. Mailing Address**
 350 Pensacola Beach Blvd. P.O. Box 716
 Suite, Apt. #, etc. Suite, Apt. #, etc.
 Suite 1

City & State **City & State** **4. FEI Number** **Applied For**
 Pensacola Beach, FL Gulf Breeze, FL 59-1799501 Not Applicable
Zip **Country** **Zip** **Country**
 32561 Santa Rosa 32562 Santa Rosa

DO NOT WRITE IN THIS SPACE

C0067469

6. Name and Address of Current Registered Agent

Gillmore, Frederick, III
 350 Pensacola Beach Blvd, Suite 1
 Pensacola Beach, FL 32561

7. Name and Address of New Registered Agent

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, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	Davis, Corbett	
STREET ADDRESS	1430 Bayshore Terrace	
CITY-ST-ZIP	Gulf Breeze, FL 32561	
TITLE	STD	<input type="checkbox"/> Delete
NAME	Gillmore, Frederick, III	
STREET ADDRESS	350 Pensacola Beach Blvd, Suite 1	
CITY-ST-ZIP	Pensacola Beach, FL 32561	
TITLE	PD	<input type="checkbox"/> Delete
NAME	Ross, Aubrey L.	
STREET ADDRESS	350 Pensacola Beach Blvd, Suite 1	
CITY-ST-ZIP	Pensacola Beach, FL 32561	
TITLE	D	<input type="checkbox"/> Delete
NAME	Eggart, R. Brownlee	
STREET ADDRESS	350 Pensacola Beach Blvd, Suite 1	
CITY-ST-ZIP	Pensacola Beach, FL 32561	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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: *Aubrey Ross* **President** **4/24/01**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (11/00)