2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 704209

FILED
Mar 25, 2000 8:00 am
Secretary of State
03-25-2000 90001 030 ****61.25

1. Entity Name

HILLSBORO-INLET APT.,INC.

Principal Place of Business	Mailing Address
HILLSBORO - INLET APT.. INC. 2501 N. OCEAN BLVD. POMPANO BEACH FL 33062	2900 E OAKLAND PK BLVD #103 #103 FT LAUDERDALE FL 33306-1804 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	#103 Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1119276 ☐ 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
DAVID E. BUCK 2900 E. OAKLAND PARK BLVD. #103 FT. LAUDERDALE FL 33306	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

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	**Make Check Payable to Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD KEARNS, LAWRENCE "BUD" 2501 NORTH OCEAN BLVD, #4 POMPANO BEACH, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MURPHY, DAN 2501 N. OCEAN BLVD., #11 POMPANO BEACH, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DOWNEY, JEANNE 2501 N. OCEAN BLVD., #9 POMPANO BEACH, FL 00000	☒ Delete OK	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR MURPHY, SHEILA 2501 N'OCEAN BLVD #19 POMPANO BEACH FL 33062	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHN, JAMES 2501 N OCEAN BLVD, #2 POMPANO BEACH, FL 00000	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JEHLE, JOHN 2501 NORTH OCEAN BLVD. #3 POMPANO BEACH, FL 00000	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TERP, LUELLA 2501 N OCEAN BLVD #16 POMPANO BEACH FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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 617, 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: Luella Terp SIGNATURE REQUIRED 3/21/00 954/784-7534
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #