

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 705175

1. Entity Name

HIBISCUS TERRACE, INC.

**FILED**  
**Feb 14, 2000 8:00 am**  
**Secretary of State**

02-14-2000 90053 037 \*\*\*\*61.25

Principal Place of Business

2400 N E 36TH ST  
LIGHTHOUSE POINT FL 33064

Mailing Address

2400 N E 36TH ST  
LIGHTHOUSE POINT FLA 33064-8186

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

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

SULLIVAN, ROBERT M. JR.  
2400 NE 36TH ST #4  
LIGHTHOUSE POINT FL 33064

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

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

TITLE PD ☐ Delete  
NAME SULLIVAN, ROBERT M. JR.  
STREET ADDRESS 2400 NE 36TH ST #4  
CITY-ST-ZIP LIGHTHOUSE PT, FL 00000 33064

TITLE VTD ☒ Delete  
NAME DIXON, THOMAS M.  
STREET ADDRESS 2400 NE 36TH ST #3  
CITY-ST-ZIP LIGHTHOUSE PT, FL 00000 33064

TITLE D ☐ Delete  
NAME THORPE, PHYLLIS  
STREET ADDRESS 2400 NE 36TH ST. APT. 1  
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

TITLE D ☒ Delete  
NAME FRASCELL, RUTH  
STREET ADDRESS 2400 NE 36TH ST #5  
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

TITLE D ☐ Delete  
NAME BEABOIS, PIERRE  
STREET ADDRESS 2400 NE 36TH ST #10  
CITY-ST-ZIP LIGHTHOUSE PT. FL 33064

TITLE SD ☐ Delete  
NAME WYATT, JOAN  
STREET ADDRESS 2400 NE 36TH ST #6  
CITY-ST-ZIP LIGHTHOUSE POINT FL 33064

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE SD ☐ Change ☒ Addition  
NAME FLAMMIA, NANCY  
STREET ADDRESS 2400 NE 36TH ST #3  
CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064

TITLE VTD ☒ Change ☐ Addition  
NAME THORPE, PHYLLIS  
STREET ADDRESS 2400 NE 36TH ST #1  
CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064

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

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

TITLE D ☒ Change ☐ Addition  
NAME Wyatt, JOAN  
STREET ADDRESS 2400 NE 36TH ST #6  
CITY-ST-ZIP LIGHTHOUSE POINT, FL 33064

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:

*Robert M. Sullivan*  
Robert M. Sullivan, JR. REQUIRED

2-8-00 (954) 782-3450

CR2E037 (9/99)