

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 705705

1. Entity Name

PLANTATION MANORS UNIT NO. 1, INC.



FILED
Aug 04, 2000 8:00 am
Secretary of State

08-04-2000 90001 038 ****61.25

Principal Place of Business

6851 CYPRESS ROAD #21
PLANTATION FL 33317

Mailing Address

6851 CYPRESS ROAD #21
PLANTATION FL 33317-3090

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1140325

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

ALEXANDER, CORINTHIA
6751 CYPRESS RD
#312
PLANTATION FL 33317

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 **P** ☐ Delete
NAME ALEXANDER, CORINTHIA
STREET ADDRESS 6751 CYPRESS RD. #312
CITY-ST-ZIP PLANTATION FL 33317

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

TITLE **VP** ☐ Delete
NAME WECINIAN, E. → MISSPELLED
STREET ADDRESS 6851 CYPRESS RD. #182
CITY-ST-ZIP PLANTATION FL 33317

☐ Change ☐ Addition
TITLE
NAME WEGMAN, E
STREET ADDRESS
CITY-ST-ZIP

TITLE **ST** ☐ Delete
NAME CUTHERSTON, ESTHER
STREET ADDRESS 6751 CYPRESS RD. #412
CITY-ST-ZIP PLANTATION FL 33317

☐ Change ☐ Addition
TITLE
NAME CUTHBERTSON, ESTHER
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME SVERAK, JOSEPH J JR
STREET ADDRESS 6851 CYPRESS RD. #12
CITY-ST-ZIP PLANTATION FL 33317

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

TITLE **D** ☐ Delete
NAME VOGELSANG, R.
STREET ADDRESS 1909 AVE. G.
CITY-ST-ZIP ROSENBERG TX 77471

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 9/5/2000 Daytime Phone # 311-119

CR2E037 (9/99)