

2000 UNIFORM BUSINESS REPORT (UBR)

2.

FILED

May 01, 2000 8:00 am
Secretary of State

02-11-2000 90032 028 ****61.25

DOCUMENT # 722676

1. Entity Name

THE NEW ENGLAND BUILDING ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O PATRICE HOBBY
157 EAST NEW ENGLAND AVENUE #375
WINTER PARK FL 32789-4340

PO BOX 127
WINTER PARK FL 32790-0127
US

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

59-1445226

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

HOBBY, PATRICE
157 E. NEW ENGLAND AVE
#380
WINTER PARK FL 32789

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 **S.D.** ☐ Delete
NAME **PATRICE HOBBY**
STREET ADDRESS **157 E NEW ENGLAND AVE #450**
CITY-ST-ZIP **WINTER PARK FL**

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

TITLE **PD** ☒ Delete
NAME **CARR, MAXINE**
STREET ADDRESS **157 E NEW ENGLAND AVE #450**
CITY-ST-ZIP **WINTER PARK FL**

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

TITLE **VP** ☐ Delete
NAME **LARUE, ROGER**
STREET ADDRESS **157 E NEW ENGLAND AVE #200**
CITY-ST-ZIP **WINTER PARK FL 32789**

TITLE **President** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Delete
NAME **WAGERS, LARRY**
STREET ADDRESS **2932 W. CHESTER AVE**
CITY-ST-ZIP **ORLANDO FL 32803**

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

TITLE **TD** ☒ Delete
NAME **STURM, RICHARD**
STREET ADDRESS **157 E. NEW ENGLAND #402**
CITY-ST-ZIP **WINTER PARK FL**

TITLE **VP D** ☐ Change ☒ Addition
NAME **For Divincenti**
STREET ADDRESS **157 E. New England Ave #301**
CITY-ST-ZIP **Winter Park FL 32789**

TITLE **D** ☒ Delete
NAME **DEPALMA, TIMOTHY**
STREET ADDRESS **20 N ORANGE AVE, #1108**
CITY-ST-ZIP **ORLANDO FL 32801**

TITLE ☐ Change ☐ Addition
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:

Patrice Hobby
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-7-00

4076283733
Date Daytime Phone #