

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 723002

1. Entity Name

TOWNSITE APARTMENTS V11, INC.

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90075 009 ****61.25

Principal Place of Business

Mailing Address

417 NORTH 'K' STREET
APARTMENT 6
LAKE WORTH FL 33460

P.O. BOX 240
LAKE WORTH FL 33460-0240
US

2. Principal Place of Business

417 NORTH K ST.

3. Mailing Address

PO BOX 290

Suite, Apt. #, etc.

APT. #2

Suite, Apt. #, etc.

LAKE WORTH

City & State

LAKE WORTH FL

City & State

FL

4. FEI Number

59-1420677

Applied For

Not Applicable

Zip

33460

Country

PALESTINE

Zip

33460

Country

PALESTINE

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TROMONTINE, PATRICIA
417 N. K. STREET APT 6
LAKE WORTH FL 33460

7. Name and Address of New Registered Agent

Name: BARTLETT, DAVID
Street Address (P.O. Box Number is Not Acceptable): 417 NORTH K ST. #2
City: LAKE WORTH FL Zip Code: 33460

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

David Bartlett
DAVID BARTLETT

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

4-14-00
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	STD	☒ Delete
NAME	TROMONTINE, PATRICIA	
STREET ADDRESS	417 N K STREET, APT 6	
CITY-ST-ZIP	LAKE WORTH, FL 00000	
TITLE	VD	☐ Delete
NAME	BARTLETT, DAVID	
STREET ADDRESS	417 NO K ST #2	
CITY-ST-ZIP	LAKE WORTH FL	
TITLE	PD	☒ Delete
NAME	HOERMANN, ROBERT O	
STREET ADDRESS	417 N K STREET APT 1	
CITY-ST-ZIP	LAKE WORTH FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PD	☒ Change ☐ Addition
NAME	BARTLETT, DAVID	
STREET ADDRESS	417 NO K ST. #2	
CITY-ST-ZIP	LAKE WORTH FL 33460	
TITLE	VD	☐ Change ☒ Addition
NAME	DINDA, DANIEL	
STREET ADDRESS	417 NO K ST. #1	
CITY-ST-ZIP	LAKE WORTH FL 33460	
TITLE	SD	☐ Change ☒ Addition
NAME	HOWARD, RICHARD	
STREET ADDRESS	417 NO K ST #6	
CITY-ST-ZIP	LAKE WORTH FL 33460	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:

DAVID BARTLETT
SIGNATURE OF REGISTERED AGENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-00 561-588-5938
Date Daytime Phone #

CR2E037 (9/99)