2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2000 8:00 am
Secretary of State
03-29-2000 90063 022 ****61.25

DOCUMENT # 723952

1. Entity Name

BELLEVIEW BILTMORE VILLAS-BAYSHORE, INC.

Principal Place of Business	Mailing Address
1700 MCMULLEN BOOTH RD STE C3 CLEARWATER FL 34619	1700 MCMULLEN BOOTH RD STE C3 CLEARWATER FL 33759-2129

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2189 Cleveland Street	2189 Cleveland Street
Suite, Apt. #, etc.: #225	Suite, Apt. #, etc.: #225
City & State: Clearwater, FL	City & State: Clearwater, FL
Zip: 33765 Country: Pinellas	Zip: 33765 Country: Pinellas

4. FEI Number: 59-1514215 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LEIGHTON, LENNARD A.
SEABOARD ARBORS MANAGEMENT SERVICES, INC.
1700 MCMULLEN BOOTH ROAD, SUITE C3
CLEARWATER FL 34619

7. Name and Address of New Registered Agent

LEIGHTON, LENNARD A
C/O SEABOARD ARBORS MANAGEMENT
2189 CLEVELAND ST. STE. 225
CLEARWATER FL 33765
US

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: Lennard A Leighton 3/22/00
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	D LEPPIAHO, JOHN 100 OAKMONT LANE #311 BELLEAIR FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP KEAST, RICHARD 100 OAKMONT LANE #802 BELLEAIR FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MCNAY, MILU 100 OAKMONT LANE #409 BELLEAIR FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MCNAY, MILU 100 OAKMONT LANE #409 BELLEAIR, FL 33756	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PTD SHEARER, EUGENE 100 OAKMONT LEN #411 BELLEAIR FL 33756	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SAILER, ELIZABETH 100 OAKMONT LANE #601 BELLEAIR, FL 33756	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD KAYE, RICHARD 100 OAKMONT LANE,#208 BELLEAIR, FLORIDA 33756	☐ 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: Maria de Lourdes (Milu) Medina 3/7/00 (727)-446-2778
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MILU MCNAY