

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 29, 2003 8:00 am
Secretary of State

02-12-2003 90078 046 ****61.25

DOCUMENT # 736826

1. Entity Name

KANAPAH MAINTENANCE, INC.



Principal Place of Business

**5745 SW 75TH ST
PMB 126
GAINESVILLE FL 32608**

Mailing Address

**5745 SW 75TH ST
PMB 126
GAINESVILLE FL 32608**

55052668



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1729409**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**WOLF, ISABEL D
5745 SW 75TH ST
SUITE 126
GAINESVILLE FL 32608**

7. Name and Address of New Registered Agent

Name

REGAN ED

Street Address (P.O. Box Number is Not Acceptable)

10003 SW 67th DR

City

GAINESVILLE

FL

Zip Code

32608

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Ed Regan **Ed Regan**

7/27/03

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
After September 10, 2003, min will be \$236.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DT	☐ Delete
NAME	HECKER, EMIL	
STREET ADDRESS	10118 S.W. 67TH DRIVE	
CITY-ST-ZIP	GAINESVILLE FL 32608	
TITLE	DS	☒ Delete
NAME	WOLF, ISABEL	
STREET ADDRESS	7108 SW 97TH LANE	
CITY-ST-ZIP	GAINESVILLE FL 32608	
TITLE	P	☒ Delete
NAME	KRONE, CARRIE	
STREET ADDRESS	7002 SW 97TH LANE	
CITY-ST-ZIP	GAINESVILLE FL 32608	
TITLE	BM	☒ Delete
NAME	CROSBY, ALFRED	
STREET ADDRESS	6216 SW 93 AVENUE	
CITY-ST-ZIP	GAINESVILLE FL 32608	
TITLE	DVP	☐ Delete
NAME	REGAN, ED	
STREET ADDRESS	10003 SW 67TH DRIVE	
CITY-ST-ZIP	GAINESVILLE FL 32608	
TITLE	BM	☒ Delete
NAME	WILLIAMS, PAUL	
STREET ADDRESS	7325 SW 97TH LANE	
CITY-ST-ZIP	GAINESVILLE FL 32608	

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS	NO CHANGE	
CITY-ST-ZIP		
TITLE	DS	☐ Change ☒ Addition
NAME	Southworth, Sherrie	
STREET ADDRESS	6715 SW 100 Lane	
CITY-ST-ZIP	Gainesville FL 32608	
TITLE	BM	☐ Change ☒ Addition
NAME	Duffer, Debra	
STREET ADDRESS	10122 SW 67 Drive	
CITY-ST-ZIP	Gainesville FL 32608	
TITLE	BM	☐ Change ☒ Addition
NAME	Frederick, Mary Ann	
STREET ADDRESS	9703 SW 67 Drive	
CITY-ST-ZIP	Gainesville FL	
TITLE	DP	☒ Change ☐ Addition
NAME	Regan, Ed	
STREET ADDRESS	10003 SW 67 Drive	
CITY-ST-ZIP	Gainesville FL 32608	
TITLE	DVP	☐ Change ☒ Addition
NAME	Lechowich, Richard	
STREET ADDRESS	7108 SW 97 Lane	
CITY-ST-ZIP	Gainesville FL 3268	

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 REQUIRED

7/27/03 352 393
352-1272

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (4/03)