

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 18, 2000 8:00 am
Secretary of State

04-18-2000 90268 031 ****61.25

DOCUMENT # 766743

1. Entity Name

PANTHER WOODS MASTER ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1105 12TH STREET
 VERO BEACH FL 32960
 US

1105 12TH ST
 VERO BEACH FL 32960-3718
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Elliott Merrill Comm. Management

3. Mailing Address

Elliott Merrill Comm. Management

Suite, Apt. #, etc.

1105 12th street

Suite, Apt. #, etc.

1105 12th street

City & State
Vero Beach FL

City & State
Vero Beach FL

4. FEI Number

65-0138691

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

MERRILL, CRAIG E
 1105 12TH STREET
 VERO BEACH FL 32960

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

Craig Merrill

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	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
PD	COMPTON, ROBERT	9415 BUNTING LAND	FT. PIERCE FL				
VPD	ESTEIN, LOTHAR	5211 INTERNATIONAL DRIVE	ORLANDO FL				
TD	WILLIAMS, JIMMIE	530 OAK COURT DRIVE	MEMPHIS TN	TD	Konggaard, Einer	3108 Bent Pine Drive	Fort Pierce, FL 34951
S	ECKMAN, DAVID	4007 MEADOWOOD DR #105	FT. PIERCE FL				
D	WALKER, JAMES	2998 CONIFER DR	FT PIERCE FL 34951				
D	WILSON, STUART	2651 CONIFER DR	FT PIERCE FL 34951				

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:

Robert E. Compton, Pres. 4/3/00 466-9181

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)