

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 855832

1. Entity Name

CENTURY NATIONAL PROPERTIES INCORPORATED

Principal Place of Business

12200 SYLVAN ST
NORTH HOLLYWOOD CA 91606

Mailing Address

12200 SYLVAN ST
NORTH HOLLYWOOD CA 91606-3229

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

95-3677269

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

COOK, RICHARD R.
309 OAKRIDGE BLVD, SUITE C
DAYTONA BEACH FL 32013

Name William E. Loucks, Esq.

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

Smith, Hood, Perkins, Loucks, Stout &
Orfinger, P.A.

444 Seabreeze Blvd. Ste. 900

City Daytona Beach

FL

Zip Code 32118

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

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME WILSON, WELDON
STREET ADDRESS 3930 ALOMAR DR
CITY-ST-ZIP SHERMAN OAKS CA

TITLE V
NAME GIBBONS, BRIAN
STREET ADDRESS 70 TESSERA AVENUE
CITY-ST-ZIP FOOTHILL RANCH, CA 92610

TITLE VD
NAME KRIER, GERALD A. -DECEASED 5-5-99
STREET ADDRESS 1081 WESTCREEK LANE
CITY-ST-ZIP WESTLAKE VILLAGE C 91362

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S
NAME BALICKI, MARIE
STREET ADDRESS 19925 LANARK STREET
CITY-ST-ZIP CANOGA PARK CA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T
NAME OSBORN, JUDITH
STREET ADDRESS 7134 POMELO DRIVE
CITY-ST-ZIP WEST HILLS CA 91307

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D
NAME KRAMER, LAWRENCE
STREET ADDRESS 1350 CAPRI
CITY-ST-ZIP PACIFIC PALISADES CA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V
NAME RIGNEY, WILLIAM D III
STREET ADDRESS 12940 HARTSOOK STREET
CITY-ST-ZIP SHERMAN OAKS CA

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(n), 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 607, Florida Statutes, and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARIE BALICKI

6-28-00

800-733-0880

Date

Daytime Phone

FILED

00 JUL -7 PM 6:10

SECRETARY OF STATE,
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE