

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **A98000001295**

1. Entity Name

**CELEBRATION WORLD RESORT MANAGEMENT, LTD.**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 MAR -1 PM 5: 56

Principal Place of Business

**7380 SAND LAKE ROAD, SUITE 560-C  
ORLANDO FL 32819**

Mailing Address

**7380 SAND LAKE ROAD, SUITE 560-C  
ORLANDO FL 32819-5248**



2. Principal Place of Business

**7503 Atlantis Way**

3. Mailing Address

**7503 Atlantis Way**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

**Kissimmee, Florida**

City & State

**Kissimmee, Florida**

4. FEI Number

**59-3512802**

Applied For

Not Applicable

Zip

**34747**

Country

**USA**

Zip

**34747**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**DYMOND, WILLIAM T JR.  
215 N. EOLA DRIVE  
ORLANDO FL 32801**

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Capital Contributions  
as Shown on record.

**\$24,975.00**

10. Amount of Capital Contributions  
in FLORIDA to date.

**11. MAKE CHECK PAYABLE TO DEPT. OF STATE  
SEE REVERSE SIDE FOR FEE INFORMATION**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.  
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P98000037364**  
NAME **CELEBRATION WORLD RESORT MANAGEMENT, INC.**  
STREET ADDRESS **7380 SAND LAKE ROAD, SUITE 560-C**  
CITY - ST - ZIP **ORLANDO FL 32819**

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13. ADDRESS CHANGES ONLY

STREET ADDRESS

**7503 Atlantis Way**

CITY - ST - ZIP

**Kissimmee, Florida 34747**

STREET ADDRESS

CITY - ST - ZIP

**7000003170297-- 3  
-03/15/00--01005--024**

STREET ADDRESS

**\*\*\*\*263.57 \*\*\*\*263.57**

CITY - ST - ZIP

STREET ADDRESS

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STREET ADDRESS

CITY - ST - ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

**SIGNATURE JOSE D. ALVARO, JR.**  
SIGNATURE, TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

2/1/00

Date

407-234-6065

Daytime Phone #