2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# F33143

Entity Name: REGENCY CABANAS, INC

FILED May 17, 2002 8:00 AM Secretary of State

Littly Na	ille. REGENCI	CADANAS, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
ONE INDE	PENDENT DR				
	IVILLE, FL 3220	2 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
ONE INDE 2210	PENDENT DR				
	IVILLE, FL 3220	2 US			
FEI Number	: 59-2089376	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
The above	e of Florida.		purpose of changing its registere	d office or registered agent, or both,	
Electronic Signature of Registered Agent			ent	Date	
		satisfy its Intangible Tax filing red Trust Fund Contribution ().	quirement and elects to do so (X).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SURFACE, FRAN	ENT DRIVE, SUITE 2210	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () [PAYLOR, LARRY 2815 MADRID AV JACKSONVILLE,	/E	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	VD () [PETWAY, THOM	Delete AS F III	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: J. FRANK SURFACE, JR. PSD 05/17/2002

5011 GATE PARKWAY, SUITE 150

JACKSONVILLE, FL 32256

Address: City-St-Zip: