

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F93000003725

1. Entity Name

ASSOCIATED HOUSING DEVELOPMENT CORP.

FILED

May 16, 2000 8:00 am
Secretary of State

05-16-2000 90090 049 ***150.00

Principal Place of Business

Mailing Address

P O BOX 515
PACIFIC PALISADES CA 90272-515
US

P O BOX 515
PACIFIC PALISADES CA 90272-0515
US

2. Principal Place of Business

3. Mailing Address

17383 SUNSET BLVD.

17383 SUNSET BLVD.

Suite/Apt. #, etc.

Suite/Apt. #, etc.

A-230

SUITE A-230

City & State

City & State

PACIFIC PALISADES, CA

PACIFIC PALISADES, CA

Zip

Country

Zip

Country

90272

USA

90272

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

B&C CORPORATE SERV. OF CENTRAL FLA., INC.
390 NORTH ORANGE AVENUE, SUITE 1100
ORLANDO FL 32801

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. 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
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
CASTO, R H III
2819 SEAHORN DRIVE
MALIBU CA 90265 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
KANTOR, STEVEN M
17383 SUNSET BLVD, SUITE A-230
PACIFIC PALISADES CA ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VSTD
WOJCIECHOWSKI, MICHAEL
327 SWARTHMORE AVE
PACIFIC PALISADES CA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
MCENULTY, FRANK E
17383 SUNSET BLVD, SUITE A-230
PACIFIC PALISADES CA ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 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:

Frank McEnulty - President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1/13/00

Daytime Phone #

310-230-2300

X-106