

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 01, 2001 8:00 am
Secretary of State

02-01-2001 90006 003 ***150.00

DOCUMENT # F96000002412

1. Entity Name

BLUEGREEN RECEIVABLES FINANCE CORPORATION I

Principal Place of Business

**4960 BLUE LAKE DRIVER
 BOCA RATON FL 33431
 US**

Mailing Address

**4960 BLUE LAKE DRIVER
 BOCA RATON FL 33431
 US**

2. Principal Place of Business

4960 Conference Way N

Suite, Apt. #, etc.

Ste 100

City & State

Boca Raton, FL

Zip

33431

Country

US

3. Mailing Address

4960 Conference Way N

Suite, Apt. #, etc.

Ste 100

City & State

Boca Raton, FL

Zip

33431

Country

US



DO NOT WRITE IN THIS SPACE

4. FEI Number **65-0667171**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

**FERGUSON, DANNY L ESQ
 4960 BLUE LAKE DR
 BOCA RATON FL 33431**

7. Name and Address of New Registered Agent

Name **Ferguson, Danny L. ESQ.**

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

4960 Conference Way N, Ste 100

City

Boca Raton

FL

Zip Code

33431

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

Danny L. Ferguson

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, 2001 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

TITLE	T	<input type="checkbox"/> Delete
NAME	CHISTE, JOHN-F	
STREET ADDRESS	5960 BLUE LAKE DRIVE	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	DPS	<input type="checkbox"/> Delete
NAME	RONDEAU, PATRICK E	
STREET ADDRESS	4960 BLUE LAKE DRIVER	
CITY-ST-ZIP	BOCA RATON FL 33-3431	
TITLE	D	<input type="checkbox"/> Delete
NAME	GAJDA, THOMAS A	
STREET ADDRESS	86 SPRING ST.	
CITY-ST-ZIP	WILLIAMSTOWN MA 01267	
TITLE	D	<input type="checkbox"/> Delete
NAME	FERGUSON, DANNY L	
STREET ADDRESS	4960 BLUE LAKE DRIVE	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Chiste, John F.	
STREET ADDRESS	4960 Conference Way N, Ste 100	
CITY-ST-ZIP	Boca Raton, FL 33431	
TITLE	DPS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rondeau, Patrick E.	
STREET ADDRESS	4960 Conference Way N, Ste 100	
CITY-ST-ZIP	Boca Raton, FL 33431	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ferguson, Danny L.	
STREET ADDRESS	4960 Conference Way N, Ste 100	
CITY-ST-ZIP	Boca Raton, FL 33431	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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)(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:

Patrick E. Rondeau

Patrick E. Rondeau, President 1/9/01 561-912-8005

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)

0623077