

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000006760

1. Entity Name

WINTER PROPERTIES, INC.

Principal Place of Business

1330 SPRING ST NW
ATLANTA GA 30304-2810

Mailing Address

1330 SPRING ST NW
ATLANTA GA 30304-2810

2. Principal Place of Business

1330 Spring Street, NW

3. Mailing Address

1330 Spring Street, NW

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Atlanta, Georgia

City & State

Atlanta, Georgia

4. FEI Number

58-2262825

Applied For

Not Applicable

Zip

30309-2810

Country

Zip

30309-2810

Country

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

WINTER CONSTRUCTION COMPANY
2907 BAY TO BAY BLVD., STE. 203
TAMPA FL 33629

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 CP
NAME SILVERMAN, ROBERT L
STREET ADDRESS 2022 RIVERMEADE WAY
CITY-ST-ZIP ATLANTA GA 30327 ☐ Delete

TITLE Controller
NAME Brandi Whitehead
STREET ADDRESS 452 Clifton Rd., #1
CITY-ST-ZIP Atlanta, GA 30307 ☐ Change ☒ Addition

TITLE DST
NAME DURKIN, SEAN
STREET ADDRESS 4470 MAY APPLE DR.
CITY-ST-ZIP ALPHARETTA GA 30302 ☒ Delete

TITLE V.P. of Development
NAME Grant Grimes
STREET ADDRESS 5498 Mt. Vernon Way
CITY-ST-ZIP Dunwoody, GA 30338 ☐ Change ☒ Addition

TITLE D
NAME ELLIS, GARY
STREET ADDRESS 4994 BERESFORD CT.
CITY-ST-ZIP NORCROSS GA 30092 ☐ Delete

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

TITLE V
NAME LURIE, ROBERT M
STREET ADDRESS 517 HEYWARD CIRCLE
CITY-ST-ZIP MARIETTA GA 30064 ☒ 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:

Brandi Whitehead
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9/13/00
Date

404/965-3387
Daytime Phone #

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90147 010 ***550.00

00101141



DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)