

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F98000004248

1. Entity Name
SUMMERVILLE AT LAKE MARY, INC.

Principal Place of Business
3000 EXECUTIVE PARKWAY
SUITE 530
SAN ROMAN CA 94583

Mailing Address
3000 EXECUTIVE PARKWAY
SUITE 530
SAN ROMAN CA 94583

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

52-2132261

Applied For

Not Applicable

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

HIQ CORPORATE SERVICES, INC.
526 EAST PARK AVE., STE 200
TALLAHASSEE FL 32301

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 12, 2001 Fee 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 C
NAME HEIMBOLD, ARTHUR
STREET ADDRESS 3000 EXECUTIVE PARKWAY, STE. 530
CITY-ST-ZIP SAN RAMON CA 94583 ☐ Delete

TITLE PCEO
NAME COBB, GRANGER
STREET ADDRESS 3000 EXECUTIVE PARKWAY, STE. 530
CITY-ST-ZIP SAN RAMON CA 94583 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE D
NAME Stuart Koenig
STREET ADDRESS 1301 Avenue of the Americas, 38th Floor
CITY-ST-ZIP New York, NY 10019 ☐ Change ☒ Addition

TITLE D
NAME Bill Benjamin
STREET ADDRESS 1301 Avenue of the Americas, 38th Floor
CITY-ST-ZIP New York, NY 10019 ☐ Change ☒ Addition

TITLE D
NAME Lee Leibart
STREET ADDRESS 1301 Avenue of the Americas, 38th Floor
CITY-ST-ZIP New York, NY 10019 ☐ Change ☒ Addition

TITLE D
NAME Dr. Howard Gardner
STREET ADDRESS 220 Sutton St.
CITY-ST-ZIP North Andover, MA 01845 ☐ Change ☒ Addition

TITLE D
NAME Richard Ackerman
STREET ADDRESS 1999 Avenue of the Americas, #1900
CITY-ST-ZIP Los Angeles, CA 90067 ☐ Change ☒ Addition

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 fees empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Aug. 27, 2001 (925) 860-1999
Date Daytime Phone #

FILED
Sep 05, 2001 8:00 am
Secretary of State

09-05-2001 90008 032 ***550.00

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DO NOT WRITE IN THIS SPACE

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CR2E034 (5/01)