

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004 8:00 am
Secretary of State

04-29-2004 90211 012 ***150.00

DOCUMENT # H55294

1. Entity Name
NTS/RESIDENTIAL PROPERTIES, INC.-FLORIDA



Principal Place of Business
10172 LINN STATION RD.
LOUISVILLE, KY 40223

Mailing Address
10172 LINN STATION RD.
LOUISVILLE, KY 40223

94070603



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03162004

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number

61-1121434

Applied For

Not Applicable

Zip

Country

Zip

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

BAVEC, RICHARD D
~~%NTS LAKE FOREST CLUB HOUSE~~
~~5350 SHORELINE CIRCLE~~
~~LAKE FOREST, FL 32771~~

Name

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

690 Lake Forest Boulevard

City

Lake Forest

FL

Zip Code

32771

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DC ☐ Delete
NAME NICHOLS, J.D.
STREET ADDRESS 10172 LINN STATION ROAD
CITY-ST-ZIP LOUISVILLE, KY

TITLE SV ☐ Delete
NAME WELLS, GREGORY A
STREET ADDRESS 10172 LINN STATION RD.
CITY-ST-ZIP LOUISVILLE, KY 40223

TITLE SVP ☒ Delete
NAME ADAMS, GARY D
STREET ADDRESS 5350 SHORELINE CIRCLE
CITY-ST-ZIP LAKE FOREST, FL 32771

TITLE VPT ☐ Delete
NAME MITCHELL, NEIL A
STREET ADDRESS 10172 LINN STATION ROAD
CITY-ST-ZIP LOUISVILLE, KY 40223

TITLE VPS ☐ Delete
NAME HOWARD, SUSAN M
STREET ADDRESS 10172 LINN STATION ROAD
CITY-ST-ZIP LOUISVILLE, FL 40223

TITLE P ☐ Delete
NAME LAVIN, BRIAN F
STREET ADDRESS 10172 LINN STATION ROAD
CITY-ST-ZIP LOUISVILLE, KY 40223

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Susan M Howard, Secretary
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/04

Date

(502) 426-4800

Daytime Phone #

Susan M Howard, Secretary