

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90413 021 ***150.00

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DOCUMENT # H80755

1. Entity Name
BURCKLE GLIDDEN ASSOCIATES, INC.



Principal Place of Business
C/O MENDOZA AND CALLAS
251 ROYAL PALM WAY, STE 602
PALM BEACH FL 33480
US

Mailing Address
12765 FOREST HILL BLVD
SUITE 1302
WELLINGTON FL 33414



2. Principal Place of Business
12765 Forest Hill Boulevard

3. Mailing Address

Suite, Apt. #, etc.
Suite 1302

Suite, Apt. #, etc.

City & State
Wellington, Florida

City & State

4. FEI Number
59-2593056

Applied For
Not Applicable

Zip
33414

Country
US

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

DE MENDOZA, MARIO G
12765 FOREST HILL BOULEVARD, SUITE 1302
WELLINGTON FL 33414

7. Name and Address of New Registered Agent

Name
Mario G. de Mendoza, III, P.A.
Street Address (P.O. Box Number is Not Acceptable)
12765 Forest Hill Boulevard, Suite 1302
City
Wellington **FL** Zip Code
33414

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 **Mario G. de Mendoza, III, President**

DATE
01/15/03

Signature of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
AS ☐ Delete
NAME
DE MENDOZA, MARIO G., III
STREET ADDRESS
251 ROYAL PALM WAY
CITY-ST-ZIP
PALM BEACH FL

TITLE
PTS ☐ Delete
NAME
GLIDDEN, MARY WYNN B.
STREET ADDRESS
251 ROYAL PALM WAY
CITY-ST-ZIP
PALM BEACH FL

TITLE
D ☐ Delete
NAME
GLIDDEN, MARY WYNN B.
STREET ADDRESS
251 ROYAL PALM WAY
CITY-ST-ZIP
PALM BEACH FL

TITLE
☐ Delete
NAME
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STREET ADDRESS
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TITLE
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NAME
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STREET ADDRESS
☐ Delete
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
AS ☒ Change ☐ Addition
NAME
de Mendoza, III, Mario G.
STREET ADDRESS
12765 Forest Hill Boulevard, Suite 1302
CITY-ST-ZIP
Wellington, Florida 33414

TITLE
PTS ☒ Change ☐ Addition
NAME
Glidden, Mary Wynn B.
STREET ADDRESS
12765 Forest Hill Boulevard, Suite 1302
CITY-ST-ZIP
Wellington, Florida 33414

TITLE
D ☒ Change ☐ Addition
NAME
Glidden, Mary Wynn B.
STREET ADDRESS
12765 Forest Hill Boulevard, Suite 1302
CITY-ST-ZIP
Wellington, Florida 33414

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

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: **Mary Wynn B. Glidden, President** 01/15/03 (561) 689-2266

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)