

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2001 8:00 am
Secretary of State
 05-07-2001 90029 026 ***150.00

DOCUMENT # H99680

1. Entity Name

SPRING VALLEY DEVELOPMENT, INC.

Principal Place of Business

**4305 VINELAND RD
 SUITE G15-A
 ORLANDO FL 32811
 US**

Mailing Address

**4305 VINELAND RD
 SUITE G15-A
 ORLANDO FL 32811
 US**

2. Principal Place of Business

4307 Vineland Road

3. Mailing Address

4307 Vineland Road

Suite, Apt. #, etc.

Suite H 12

Suite, Apt. #, etc.

Suite H 12

City & State

Orlando FL

City & State

Orlando FL

Zip

32811

Country

Zip

32811

Country

4. FEI Number

59-2632005

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

**STONE, STEPHEN M ESQ.
 725 NORTH MAGNOLIA AVENUE
 ORLANDO FL 32803**

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 \$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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Delete
 NAME **VD ROHDIE, ROBERT C**
 STREET ADDRESS **4305 VINELAND RD. STE G15-A**
 CITY-ST-ZIP **ORLANDO FL 32811**

TITLE ☒ Change ☐ Addition
 NAME **4307 Vineland Road Suite H12**
 STREET ADDRESS **Orlando FL 32811**
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME **D GINSBURG, ALAN H**
 STREET ADDRESS **1551 SANDSPUR RD**
 CITY-ST-ZIP **MAITLAND FL 32751**

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

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/01

Date

407-650-1958

Daytime Phone #

CR2E034 (10/00)