

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J13211

1. Entity Name
RE/MAX CAROLINA, INC.

FILED
Apr 26, 2001 8:00 am
Secretary of State

04-26-2001 90322 050 ***150.00

Principal Place of Business
2170 SR 434 W., SUITE 330
LONGWOOD FL 32779
US

Mailing Address
2170 SR 434 W., SUITE 330
LONGWOOD FL 32779
US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
255 PRIMERA BOULEVARD
Suite, Apt. #, etc.
SUITE 332
City & State
LAKE MARY FL
Zip
32746
Country
USA

3. Mailing Address
255 PRIMERA BOULEVARD
Suite, Apt. #, etc.
SUITE 332
City & State
LAKE MARY FL
Zip
32746
Country
USA

4. FEI Number 58-1715930
Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

HEERN, JAMES F. JR
215 N. COLA DR.
ORLANDO FL 32802

7. Name and Address of New Registered Agent

Name David A. Beyer
Piper Marbury Rudnick & Wolfe LLP
Street Address (P.O. Box Number is Not Acceptable)
101 E. Kennedy Blvd., #2000
City Tampa
Zip Code 33602

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 *David A. Beyer*
Signature, typed or printed name of registered agent and state 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD HACHENBERGER, DONALD J. 2170 SR 434 W., SUITE 330 LONGWOOD FL 32779	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MCWATER, ROBERT R. 2170 SR 434 W., SUITE 330 LONGWOOD FL 32779	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV HACHENBERGER, GLENDA A. 2170 SR 434 W., SUITE 330 LONGWOOD FL 32779	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MCCAIN, ELAINE A. 2170 SR 434 W., SUITE 330 LONGWOOD FL 32779	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	255 PRIMERA BOULEVARD SUITE 332 LAKE MARY FL 32746	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	255 PRIMERA BOULEVARD SUITE 332 LAKE MARY FL 32746	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	255 PRIMERA BOULEVARD SUITE 332 LAKE MARY FL 32746	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ 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 like empowered.

SIGNATURE: *Donald J. Hachenberger*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/01 (407) 829-7303
Date Daytime Phone #

CR2E034 (10/00)