

2000 UNIFORM BUSINESS REPORT (UBR)

FILED  
Jun 07, 2000 8:00 am  
Secretary of State  
06-07-2000 90436 029 \*\*\*150.00

DOCUMENT # **L55146**  
Entity Name  
**FLORIDA PALMS, INC.**

Principal Place of Business      Mailing Address  
**1600 SANIBEL DRIVE**      **1400 W. FAIRBANKS AVENUE**  
**MISSIMMEE, FL 34741**      **SUITE 102**  
      **WINTER PARK, FL 32789-4880**

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      Applied For  
**59-3028938**      Not Applicable  
5. Certificate of Status Desired      ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent  
**CHASTANG, LAWRENCE**  
**1400 W. FAIRBANKS AVENUE**  
**SUITE 102**  
**WINTER PARK, FL 32789-4880**

7. Name and Address of New Registered Agent  
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]*      DATE **5/1/00**  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

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, 2000 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      ☐ Delete  
STREET ADDRESS      CITY-ST-ZIP  
**PST SMOLDERS, JOHN**  
**1400 W. FAIRBANKS AVE., STE 102**  
**WINTER PARK, FL 32789-4880**  
TITLE      NAME      ☐ Delete  
STREET ADDRESS      CITY-ST-ZIP  
TITLE      NAME      ☐ Delete  
STREET ADDRESS      CITY-ST-ZIP  
TITLE      NAME      ☐ Delete  
STREET ADDRESS      CITY-ST-ZIP  
TITLE      NAME      ☐ Delete  
STREET ADDRESS      CITY-ST-ZIP  
TITLE      NAME      ☐ Delete  
STREET ADDRESS      CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  
TITLE      NAME      ☐ Change      ☐ Addition  
STREET ADDRESS      CITY-ST-ZIP  
**V.P. LAWRENCE J. CHASTANG**  
**1400 W. FAIRBANKS AVENUE, SUITE 102**  
**WINTER PARK, FL 32789**  
TITLE      NAME      ☐ Change      ☐ Addition  
STREET ADDRESS      CITY-ST-ZIP  
TITLE      NAME      ☐ Change      ☐ Addition  
STREET ADDRESS      CITY-ST-ZIP  
TITLE      NAME      ☐ Change      ☐ Addition  
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]*      **5/1/00**      **407-228-1944**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #

CR2E034 (9/99)