

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 28, 2001 8:00 am
Secretary of State

02-28-2001 90030 007 ***158.75

DOCUMENT # L62229

1. Entity Name
IBIS LAKES CO.

Principal Place of Business

Mailing Address

C/O E. LLWYD ECCLESTONE, III
1555 PLAM BCH. LAKES BLVD.. S-1100
WEST PALM BCH. FL 33401

C/O E. LLWYD ECCLESTONE, III
1555 PLAM BCH. LAKES BLVD.. S-1100
WEST PALM BCH. FL 33401

2. Principal Place of Business

3. Mailing Address

357 Hiatt Drive

357 Hiatt Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

A

A

City & State

City & State

Palm Beach Gardens, FL

Palm Beach Gardens, FL

Zip

Country

33418

USA

Zip

Country

33418

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ECCLESTONE, E. LLWYD, III
1555 PALM BCH. LAKES BLVD.
S-1100
WEST PALM BCH. FL 33401

Name
E. LLWYD ECCLESTONE, III

Street Address (P.O. Box Number is Not Acceptable)
357 Hiatt Drive,

Suite A

City
Palm Beach Gardens

FL

Zip Code
33418

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 *E. Llwyd Ecclestone, III*
Signature, in ink, of the registered agent and, if applicable, the entity's principal officer or director.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/11/01

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 DCP
NAME ECCLESTONE, E. LLWYD III ☐ Delete
STREET ADDRESS 1555 PALM BCH LAKES BLVD
CITY-ST-ZIP WEST PALM BCH. FL

TITLE DCP ☒ Change ☐ Addition
NAME ECCLESTONE, E. LLWYD III
STREET ADDRESS 357 Hiatt Drive, Suite A
CITY-ST-ZIP Palm Beach Gardens

TITLE S ☒ Delete
NAME NANNETTE GAMMON
STREET ADDRESS 1555 PALM BEACH LAKES BLVD
CITY-ST-ZIP W. PALM BEACH FL

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

TITLE EV ☒ Delete
NAME COOPER, RON
STREET ADDRESS 1555 PALM BCH LKS BLVD
CITY-ST-ZIP W PALM BEACH FL

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Secretary ☐ Change ☒ Addition
NAME Rosanne Piretti
STREET ADDRESS 357 Hiatt Drive, Suite A
CITY-ST-ZIP Palm Beach Gardens, FL 33418

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Treasurer ☐ Change ☒ Addition
NAME Joseph Hagelin
STREET ADDRESS 357 Hiatt Drive, Suite A
CITY-ST-ZIP Palm Beach Gardens, FL 33418

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *E. Llwyd Ecclestone, III*

SIGNATURE AND PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/11/01 861-627-1220

CR2E034 (10/00)