

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L77893

1. Entity Name

MARKHAM WOODS REALTY, INC.

Principal Place of Business

1766 ALAQUA DR
LONGWOOD FL 32779
US

Mailing Address

2200 GORDON DRIVE
NAPLES FL 34102-7648

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

A.G.C. CO.
2300 SUN BANK CENTER, 200 S ORANGE AVE.
ORLANDO FL 32801

Name
INTRASTATE REGISTERED AGENT CORPORATION
Street Address (P.O. Box Number is Not Acceptable)
c/o Holland & Knight, 701 Brickell Avenue
Suite 3000
City Miami FL 33131

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

Louis T.M. Conti, Vice President

2/17/00

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 the 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE V ☐ Delete
NAME SEXTON, DAVID N
STREET ADDRESS 1167 THIRD STREET, S
CITY-ST-ZIP NAPLES FL 34102

TITLE ☐ Change ☐ Addition
NAME 200003156262-0
STREET ADDRESS -03/03/00--01054--021
CITY-ST-ZIP ****150.00 ****150.00

TITLE PD ☐ Delete
NAME DE GROOTE, MICHAEL H JR
STREET ADDRESS 1100 BURLOAK DRIVE. BURLINGTON ONTARIO
CITY-ST-ZIP CANADA L7L6B2

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

TITLE DVS ☐ Delete
NAME PEKARUK, JERRY
STREET ADDRESS 1100 BURLOAK DR. BURLINGTON ONTARIO
CITY-ST-ZIP CANADA L7L6B2

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

TITLE DV ☒ Delete
NAME LUCHAK, FRED
STREET ADDRESS 11 VICTORIA STREET, P.O. BOX HM 1065
CITY-ST-ZIP HAMILTON HMEX BERMUDA

TITLE DV ☐ Change ☒ Addition
NAME MARTYN, ROBERT W.
STREET ADDRESS 11 VICTORIA STREET
CITY-ST-ZIP HAMILTON, HMEX, BERMUDA

TITLE DV ☐ Delete
NAME DEGROOTE, GARY W
STREET ADDRESS 1100 BURLOAK DR. BURLINGTON ONTARIO
CITY-ST-ZIP CANADA L7L6B2

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

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 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

JERRY PEKARUK

Date

Daytime Phone #

941-262-3217

CR2E034 (9/99)

KE