

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L94000000613

1. Entity Name

H.P. PROPERTIES, L.C.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 JAN 31 AM 8:10

Principal Place of Business
14831 LAGUNA DRIVE
FORT MYERS FL 33908

Mailing Address
14831 LAGUNA DRIVE
FORT MYERS FL 33908-2181

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 65-0540468

Applied For

Not Applied

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FASIG, DONALD L
14831 LAGUNA DRIVE
FORT MYERS FL 33908

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

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS

10. ADDITIONS/CHANGES

TITLE MGR
NAME ROGERSON, C E
STREET ADDRESS 8846 WESTLAWN
CITY-ST-ZIP BEREAH OH 44017 ☐ Delete

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

TITLE MGR
NAME PHASE III REAL ESTATE SERVICES INC.
STREET ADDRESS 14831 LAGUNA DRIVE
CITY-ST-ZIP FORT MYERS FL ☐ Delete

2000003121882--7
-02/03/00--01012 Change 015 Addition
*****50.00 *****50.00

TITLE MEM
NAME PHASE III REAL ESTATE SERVICES INC.
STREET ADDRESS 14831 LAGUNA DRIVE
CITY-ST-ZIP FORT MYERS FL ☐ Delete

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

TITLE MEM
NAME ROGERSON, C E
STREET ADDRESS 8846 WESTLAWN
CITY-ST-ZIP BEREAH OH 44017 ☐ Delete

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

TITLE MEM
NAME LEPP, PETER J
STREET ADDRESS 871 BELLEAU WOOD DR.
CITY-ST-ZIP AKRON OH 44303 ☐ Delete

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

TITLE MEM
NAME VINE, JAMES R
STREET ADDRESS % 14600 DETROIT AVE., STE. 1450
CITY-ST-ZIP LAKEWOOD OH 44107 ☐ Delete

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

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Phase III Real Estate Services, Inc., Manager*
Donald L. Fasig, Pres.
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

1-28-00

Date

941-433-1100

Daytime Phone #