

# 2000 UNIFORM BUSINESS REPORT (UBR)

0006564 AF

DOCUMENT # L99000005732

1. Entity Name  
HALLIDAY FAMILY'S HIGHLAND PARK TRAILER PARK, L.

FILED

00 JUN 15 PM 4:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business

2250 GRIFFIN ROAD  
DANIA BEACH FL 33312

Mailing Address

10097 CLEARY BLVD.  
PLANTATION FL 33324-1065

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

City & State

4. FEI Number

65-0967575

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~POBJECKY, J. DAVID~~

~~788 AVENUE G SW~~

~~WINTER HAVEN FL 33880~~

Name

ROBERT HALLIDAY III

Street Address (P.O. Box Number is Not Acceptable)

10097 Cleary Boulevard

Plantation

City

Plantation

FL

Zip Code

33324

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

*Robert Halliday III*  
Signature, typed or printed name of registered agent and title if applicable.

ROBERT HALLIDAY III

1/18/2000

(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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
MGRM  
HALLIDAY FAMILY CORPORATION  
10097 CLEARY BLVD.  
PLANTATION FL 33324

☐ Delete

TITLE  
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☐ 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:

*Robert Halliday III*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER

ROBERT HALLIDAY III

1/18/2000

Date

Daytime Phone #

CR2E083 (9/99)