

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N15519

1. Entity Name

JOHN YOUNG COMMERCE CENTER PROPERTY OWNERS ASSOC

FILED

Jan 12, 2000 8:00 am
Secretary of State

01-12-2000 90016 049 ****61.25

Principal Place of Business

Mailing Address

% RICHARD T. DAVIS
631 TRIUMPH CT.
ORLANDO FL 32805
US

% RICHARD T. DAVIS
P. O. BOX 941662
MAITLAND FL 32794-1662
US

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

59-2826888

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DAVIS, RICHARD T
1110 N. LAKE SYBELIA DR.
MAITLAND FL 32751

Name **RICHARD T. DAVIS**

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

2452 SW 90th PLACE

City **BUSHNELL**

FL

Zip Code **33513**

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 \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Delete
NAME **DAVIS, RICHARD M**
STREET ADDRESS **2452 SW 90TH PL**
CITY-ST-ZIP **BUSHNELL FL 33513**

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

TITLE **D** ☐ Delete
NAME **DAVIS, TODD**
STREET ADDRESS **1315 WORDALE AVE**
CITY-ST-ZIP **WINTER PARK FL 32789**

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

TITLE **DS** ☐ Delete
NAME **HARRELL, ROBERT S**
STREET ADDRESS **2800 TRENTWOOD BLVD.**
CITY-ST-ZIP **ORLANDO FL 32812**

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

TITLE **ASD** ☐ Delete
NAME **DAVIS, RICHARD T JR**
STREET ADDRESS **1108 HOFFNER AVE**
CITY-ST-ZIP **ORLANDO FL 32809**

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

TITLE ☐ Delete
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NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard T. Davis
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.4.00

407.875.800.

Date

Daytime Phone #