

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 92187 038 ****61.25

DOCUMENT # N31754

1. Entity Name

CENTRAL FLORIDA CHAPTER OF THE NATIONAL ASSOCIATION OF INDUSTRIAL AND OFFICE PARKS, INC.



Principal Place of Business

**222 S WESTMONTE DR
STE 101
ALTAMONTE SPGS FL 32714
US**

Mailing Address

**POB 150127
ALTAMONTE SPGS FL 32715
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

59-2965099

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**KAUTTER, WILLARD S
222 S WESTMONTE DRIVE STE 101
ALTAMONTE SPRINGS FL 32714**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	M KAUTTER, WILLARD S 222 S WESTMONTE DR, STE 101 ALTAMONTE SPRINGS FL 32714 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T POLEJES, CRAIG 135 W CENTRAL BLVD STE 1200 ORLANDO FL 32801 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PEP LIVINGSTON, GEORGE 2200 LOUCIEN WAY, #350 MAITLAND FL 32751 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PPD PATTEN, DAVID 200 S ORANGE AVENUE, #2210 ORLANDO FL 32801 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MCCORMICK, NAN 201 S ORANGE AVENUE ORLANDO FL 32801 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CARMAN, PAM 5311 PEBBLE BEACH DR ORLANDO FL 32811 ☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Free, Bart 135 W Central Blvd #240 Orlando FL 32801 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PPD ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Moore, Sandra 900 Orange Avenue Winter Park FL 32789 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Lieblich, Mark 200 S Orange Ave #2300 Orlando FL 32801 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition

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

SIGNATURE:

Willard S. Kautter

Willard S. Kautter

4/22/03

407-774-7880

CR2E037 (10/02)