2000 UNIFORM BUSINESS REPORT (UBR)

4/

DOCUMENT # N31946

1. Entity Name

THE GARDEN VILLAS AT GATOR TRACE OF ST. LUCIE HO

FILED
May 22, 2000 8:00 am
Secretary of State
04-21-2000 90032 047 ****61.25

Principal Place of Business	Mailing Address
4078 GATOR TRACE ROAD FT. PIERCE FL 34982 US	4078 GATOR TRACE ROAD FT. PIERCE FL 34982-6886 US

4062 Garden Villas ct

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FT Pierce FL	City & State
Zip: 34982 Country: USA	Zip Country

4. FEI Number: 65-0191725 ☐ 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
SUNBERG, DICK 4078 GATOR TRACE ROAD FORT PIERCE FL 34982	Name: JAMES LENNON Street Address (P.O. Box Number is Not Acceptable): 4062 GARDEN VILLAS CT City: FT Pierce FL Zip Code: 34982

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: JAMES LENNON, Treasurer James Lennon 4/14/00
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DP DEBOR, BOB 4054 GARDEN VILLAS COURT FT. PIERCE FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary marie clum 4059 Garden villas ct Ft Pierce, FL 34982	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT SUNDBERG, DICK 4078 GATOR TRACE ROAD FT. PIERCE FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer James Lennon 4062 Garden Villas ct Ft Pierce, FL 34982	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP PETERSON, DAVID 4071 GARDEN VILLAS CT FT. PIERCE FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Lawrence Albert, VP 4036 Gator Trace Rd Ft Pierce, FL 34982	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP SCIACCO, KAY 4045 GATOR TRACE ROAD FT. PIERCE FL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS MEKO, ROBERT 4076 GATOR TRACE RD. FORT PIERCE FL 34982	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: SIGNATURE REQUIRED James Lennon 4/14/00 (561) 466-3474
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #