## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION **ANNUAL REPORT** 

1997

NAME STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N95000001713 (5)

## UNITED DEVELOPMENT COMMUNITIES, INC.

Dringing Piece	o of Business	Edelling 6 aldrage	·		
Principal Place of Business		Mailing Address			•
3706 NO. OCEAN BLVD. STE 370 FORT LAUDERDALE FL 33308		3706 NO. OCEAN BLVD. S FORT LAUDERDALE FL 33			
				3. Date incorporated or Qualified 04/12/1995	3a. Date of Last Report 07/16/1996
2. Principal Place of Business		28. Mailing Address		4. FEI Number 65-0591072	Applied For
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		03 033 1072	Not Applicable
22		27		5. Certificate of Status Desired	S8.75 Additional Fee Regulred
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	☐ Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25 9. Name and Address of Curren	29 Annual Annual	30	Florida Statutes  10. Name and Address of New Re	Yes X No
		tiogiolorou rigorit	B1 Name	10. Nume and Address of flow flo	Aleroton Afforti
MIMNA, CURTIS			82 Street	A-1-1	
3706 NO. OCEAN BLVD. STE 370			62 Street	Address (P.O. Box Number is Not Acceptab	ole)
FORT LAUDERDALE FL 33308			83		
			84 City		85 Zip Code
					FL
office or r	to the provisions of Sections 617.050 egistered agent, or both, in the State of the feeting the children for	i2 and 617.1508, Florida Statu of Florida. Such change was otions of Socien 617.0503. F	ites, the above-named authorized by the corp	corporation submits this statement for the poration's board of directors. I hereby accep	ourpose of changing its registered of the appointment as registered
SIGNATURE	The same accept the court	n Muse	Curtis John	un .	1/2/07
	Signature, typed or printed name of registered age	int and little if applicable. (NO	TE Registered Agent signature	required when reinstating)	DATE DATE
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PD MIMNA, CURTIS	☐ DELETE	1.1 TUTLE		Change Addition
NAME Street address	3706 NO. OCEAN BLVD. STE	370	1.2 NAME		
CITY-ST-ZIP	FORT LAUDERDALE FL 33308	* * *	1.8 STREET ADDRESS 1.4 CITY-ST-ZIP		
TITLE	VSD	DELETE	2.4 TITLE		Change Addition
NAME	BAKER, PRISCILLA		2.P NAME		
STREET ADDRESS	3706 NO. OCEAN BLVD. STE	370	2.8 STREET ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33308		2. 4 CITY - ST - ZIP		ľ
TITLE	TD	☐ DELETE	3.1 TITLE		Change Addition
NAME	REVALES, RON	***	3.P NAME		
STREET ADDRESS	3706 NO. OCEAN BLVD. STE		3.§ STREET ADDRESS		
CITY-ST-ZIP TITLE	FORT LAUDERDALE FL 33308	DELETE	3.4. CITY- \$1 - ZIP 4.1 TITLE		Change Addition
NAME		ניין מניניני	4.4 TITLE 4. 2 NAME		☐ Change ☐ Addition
STREET ADDRESS			4. 2 NAME 4.8 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME		·	5.2 NAME		
STREET ADDRESS			5.8 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 12 or Block 13 if changed, or on an attachment with an address.

**6.8 STREET ADDRESS** 

**FILED** 

May 09 1997 8:00am

Secretary of State