## **2001 UNIFORM BUSINESS REPORT (UBR)**

1. Entity Nan	MENT # N98000	005148			,	FIL	EU 'OF STATE	
SOUTHEAST FLORIDA PRESERVATION, INC.					SEURETARY OF STATE PVISION OF CORPORATION			
Principal Plac	e of Business	Mailing Address	- (A)(C)	72.	Ĺ	01 APR 30	AM II: 36	
20 NORTH S DELRAY BEA	WINTON AVENUE CH FL 33444	Mailing Address P.O. BOX 1221 DELRAY BEACH FL 33447-1221						
2. Principal F	Place of Business	3. Mailing Address	····					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
								policed For
City & Stat	e	City & State		4, 1	FEI Number	0425946	<del></del>	pplied For ot Applicabl
Zip	Country	Zip	Country	5. (	Certificate of Status	Desired 🗀	\$8.75 Ad Fee Require	
	6. Name and Address of Current	Registered Agent		7. 1	Name and Address	of New Registe		
			Name					
JOHNSO		Street Address		Address (P.O. E	Box Number is Not /	Acceptable)		
20 NORTH SWINTON AVENUE DELRAY BEACH FL 33444		<u> </u>						
DELIGNI	DEAGN FL 30444		City				FL Zip Coo	le
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOT	E: Registered Agent signa	ture required when re	einstating)	Di	ATE	
SIGNATURE	Signature, typed or printed name of registered agent  FILE NOW: FEE IS \$61.25	and title if applicable. (NOTI  9. Election Campaigr  Trust Fund Contrib	n Financing	ture required when re \$5.00 Ma Added to Fe	y Be	Make Che	eck Payable to	············
SIGNATURE	FiLE NOW: FEE IS \$61.25	9. Election Campaigr Trust Fund Contrib	n Financing	\$5.00 Ma Added to Fe	y Be	Make Che Departm	eck Payable to nent of State	
10. TITLE NAME STREET ADDRESS	FILE NOW: FEE IS \$61.25  OFFICERS AND DII  DC CURL, DONALD W DR 799 ST ALBANS DRIVE	9. Election Campaigr Trust Fund Contrib	n Financing oution.	\$5.00 Ma Added to Fe	y Be ees	Make Che Departm	eck Payable to nent of State	V 10
<b>10.</b> Title	FILE NOW: FEE IS \$61.25  OFFICERS AND DII  DC CURL, DONALD W DR 799 ST ALBANS DRIVE BOCA RATON FL 33486 DV TILLMAN, DORIS 106 SO DEPOT DR	9. Election Campaigr Trust Fund Contrib RECTORS	n Financing pution.   11.  TITLE NAME STREET ADDRESS	\$5.00 Ma Added to Fe	y Be ees	Make Che Departm	ck Payable to nent of State	N 10 ☐ Additio
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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.

Don'ts D. Tillman Doris D. Tillman 4/16/01 561-466-3880 SIGNATURE:

Daytime Phone #

STATE OF FLORIDA 智 **EVOUCHER SCHEDULE** S-W/Agency Voucher No. olo 450000 **D10-0066-5**04 ਲੈਂ-₹ 005927 ਅ DEPARTMENT DEPARTMENT OF STATE SITE TRANS 45 COMPTROLLER ACCOUNT NUMBER CF TRANS 25 **OBJECT** CODE COMPTROLLER ACCOUNT NAME PROPERTY - SE INVOICE INVOICE AMOUNT INCREASE AMOUNT INCREASE AMOUN 45101000132-4520010000-04000000 3-13 4990 ADMINISTRATIVE SERVICES DIVISIO EXPENSES 11NV: 000004665 45202130001-4530010000-00010000 61. CORPORATIONS TRUST FUND DOS TOTAL TOTAL RANSACTION TYPE: JOURNAL ADVICE 61.25 61.3 I hereby certify that the above transactions are in accordance with the For State Comptroller's Use Only Florida Statutes and all applicable laws and rules of the State of Florida. Time In APPROVED: Audited By

TITLE

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