

2000 UNIFORM BUSINESS REPORT (UBR)

2/

DOCUMENT # N99000000324

1. Entity Name

WYMAN COMMUNITY DEVELOPMENT CORPORATION

FILED
May 01, 2000 8:00 am
Secretary of State

02-09-2000 90084 008 ****70.00

Principal Place of Business

Mailing Address

125 COASTLINE RD., S-1400
SANFORD FL 32771

125 COASTLINE RD., S-1400
SANFORD FL 32771-6309

2. Principal Place of Business

207 N. Moss Rd

3. Mailing Address

207 N. Moss Rd

Suite, Apt. #, etc.

Suite 105

Suite, Apt. #, etc.

Suite 105

City & State

Winter Springs, FL

City & State

Winter Springs, FL

Zip

32708

Country

Seminole

Zip

32708

Country

Seminole

4. FEI Number

59-3553145

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BIRLE, ERIC
302 MORNING GLORY DR.
LAKE MARY FL 32746

Name

SAME

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.

SIGNATURE

NA

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

PD
PERRONE, ANTHONY
151 SOUTHHALL LANE
MAITLAND FL 32751

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Delete

VD
BURKETT, DOTTIE
1345 E. 28TH ST.
SANFORD FL 32773

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☒ Delete

STD
BONNETT, TODD
408 PINEVIEW ST.
ALTAMONTE SPRINGS FL 32701

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Betty Higar, VD
312 Rachel Ave #918
SANFORD, FL 32771

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

STD
BIRLE, ERIC
302 Morning Glory Drive
LAKE MARY, FL 32746

TITLE NAME STREET ADDRESS CITY-ST-ZIP ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

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

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Secretary/Treasurer 2/1/00

Date

Daytime Phone #

CR2E037 (9/99)