

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 19, 2001 8:00 am**  
**Secretary of State**

07-19-2001 90003 044 \*\*\*558.75

**DOCUMENT # P00000035979**

1. Entity Name

**APS OF HOLLYWOOD, INC.**

Principal Place of Business

**4046 N. 30TH AVE.  
HOLLYWOOD FL 33020**

Mailing Address

**4046 N. 30TH AVE.  
HOLLYWOOD FL 33020**

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

**52-222 8652**

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

**CT CORPORATION SYSTEM  
1200 SO. PINE ISLAND RD.  
PLANTATION FL 33324**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)



**FILE NOW!!! FEE IS \$550.00  
After September 12, 2001 Fee will be \$750.00  
Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution.



**\$5.00 May Be  
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
SOLLINS, CHARLES D  
4700 CORRIDOR PLACE, STE. B  
BELTSVILLE MD 20705**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**Timothy Jeffrey Wilbur  
10880 Cameron Ct, #207  
Davie, FL 33324**

☐ Change

☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
PATTERSON, D. SCOTT D  
FIRSTSERVICE BLDG., 1140 BAY ST. STE. 4000  
TORONTO, ONT M5S 2B4**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**S/T  
Richard C. Naden  
4700 Corridor Place, Suite B  
Beltsville, MD 20705**

☐ Change

☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D  
FRIEDRICHSEN, JOHN B  
FIRSTSERVICE BLDG., 1140 BAY ST. STE. 4000  
TORONTO, ONT M5S 2B4**

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Delete

TITLE  
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STREET ADDRESS  
CITY-ST-ZIP

☐ Change

☐ Addition

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☐ Change

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CITY-ST-ZIP

☐ Change

☐ Addition

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

**SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**  
**Timothy J Wilbur**  
**President**

Date

**7/10/01 954-961-0222**

Daytime Phone #

0022806 AV

CR2E034(5/01)A