

2001 UNIFORM BUSINESS REPORT (UBR)

5/

FILED
Jun 15, 2001 8:00 am
Secretary of State

05-11-2001 90073 036 ***150.00

DOCUMENT # P00000037794

1. Entity Name

AEGIS ESTATE SERVICES, INC.



Principal Place of Business

Mailing Address

500 N. MAITLAND AVE., STE. 200
MAITLAND FL 32751

500 N. MAITLAND AVE., STE. 200
MAITLAND FL 32751

2. Principal Place of Business

2471 Aloma Ave

3. Mailing Address

2471 Aloma Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.

101

101

City & State

Winter Park, FL

City & State

Winter Park, FL

Zip

32792

Country

Orange

Zip

32792

Country

Orange

4. FEI Number

59-3640514

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KRONHAUS, JULIE W
500 N. MAITLAND AVE., STE. 200
MAITLAND FL 32751

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

2471 Aloma Ave, Ste 101

City

Winter Park

FL

Zip Code

32792

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 resigning)

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 \$150.00
After MAY 1, 2001 Fee will be \$550.00
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

TITLE D ☐ Delete
NAME KRONHAUS, JULIE W
STREET ADDRESS 500 N. MAITLAND AVE., STE. 200
CITY-STATE-ZIP MAITLAND FL 32751

TITLE D ☐ Delete
NAME DOLTEREN-FOURNIER, HELEN VON
STREET ADDRESS 836 JAMESTOWN DR.
CITY-STATE-ZIP WINTER PARK FL 32792

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-STATE-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME 2471 Aloma Ave, Ste 101
STREET ADDRESS Winter Park, FL 32792
CITY-STATE-ZIP

TITLE ☒ Change ☐ Addition
NAME 2471 Aloma Ave, Ste 101
STREET ADDRESS Winter Park, FL 32792
CITY-STATE-ZIP

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

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

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

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

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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

4/27/01 407-645-5777

CR2E034 (10/00)