2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # PC

P00000058103

1. Entity Name WILDWOOD MOUNTAIN HOMES AND PROPERTY, INC.



FILED Jan 21, 2003 8:00 am Secretary of State

01-21-2003 90083 019 ***150.00

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Principal Place of Business 6871 BOTTLEBRUSH LANE NAPLES FL 34109		Mailing Address 8871 BOTTLEBRUSH LANE NAPLES FL 34109									
2. Principal Place of Business			3. Mailing Address				- I REBIJOOH HIK BONIN BENIN DONIN BERNIN BERNIN BERNIN HARRI NAMAN HARRI DANOG MINI REDA 				
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES				
		City & State				4. F	58-2621160	1160		Applied For Not Applicable	
Zip	Country	Zip		Count	try	5. (Certificate of Status Desired		8.75 A		
	6. Name and Address of Current	Register	ed Agent			7. 1	lame and Address of New Re	gistered Ag	jent		
-					Name *	-					
SMITH, CHRISTOPHER T 6871 BOTTLEBRUSH LANE NAPLES FL 34109 8. The above named entity submits this statement for the purpose of changing its retate obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: R					Ctroot Add	20 (B O . C	av Numbar in Not Assestable)				
6871 BOTTLEBRUSH LANE					Street Addres	55 (P.U. B	ox Number is Not Acceptable)				
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TWN LLO	, 9 , 100						· · · · · · · · · · · · · · · · · · ·		1		
					City			FL	Zip Co	de	
8 The above	named entity submits this statement fo	r the nurn	oose of changing its re	gistere	ed office or regis	stered ag	ent, or both, in the State of Flori	da. Lam far	niliar with	n, and accept	
		, 4.0 porp	out on one name of the contract of	9.0.0.	a simos er regin		•··· , •· • • • · · · · · · · · · · · · · · ·				
SIGNATURE	Signature, typed or printed name of registered agent	and title if an	plicable. (NOTE: R	legistered	Agent signature requ	uired when re	instating)	DATE			
	Same of the or branch trains or together again		The state of the s		3						
	ILE NOW!!! FEE IS \$150.00						9. Election Campaign Fina	ncing	\$5.	00 May Be	
	r May 1, 2003 Fee will be \$550.00	4 Chata					Trust Fund Contribution			ed to Fees	
Make Chec	k Payable to Florida Department o										
10.	OFFICERS AND	DIRECTO		11.		AD	DITIONS/CHANGES TO OFFIC				
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NAME	SMITH, CHRISTOPHER T 6871 BOTTLEBRUSH LANE	-		NAMI							
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CITY-ST-ZIP				CITY	-ST-ZIP			-			
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12. I hereby certify that the information supplied w indicated on this report or supplemental report of the corporation or the receiver or trustee changed, or on an attachment with an address

by this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 powered to execute this report as regularly by Chapter 607, Florida Statutes, and that my name appears in Block 10 or Block 11 if swith all other like empowered.

SIGNATURE:

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIBECTOR

☐ Delete

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

len 152003

Daytime Phone #

☐ Change

☐ Addition