

2001 UNIFORM BUSINESS REPORT (UBR)

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

07-10-2001 90129 043 ***150.00

0143897 SP

DOCUMENT # P00000100550

1. Entity Name

WINCHESTER APARTMENTS OF LAKE WORTH, INC.

LA

Principal Place of Business

**6696 E. LISTERON
 BOYTON BEACH FL 33437**

Mailing Address

**6696 E. LISTERON
 BOYTON BEACH FL 33437**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

12165-105839

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
 Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**EFFMAN, BERNARD
 6696 E. LISTERON
 BOYTON BEACH FL 33437**

7. Name and Address of New Registered Agent

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

TITLE **D** ☐ Delete
 NAME **EFFMAN, BERNARD**
 STREET ADDRESS **6696 E. LISTERON**
 CITY-ST-ZIP **BOYTON BEACH FL 33437**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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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 Required

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/01)

Attachment 10066
#P00000100550

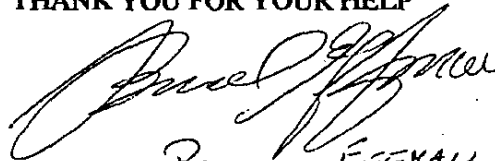
WINCHESTER APARTMENTS OF LAKE WORTH INC
DOCUMENT # P00000100550

7-5-01

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

THE ABOVE CORPORATION WAS FORMED 10-25-00. UNTIL NOW WE NEVER
RECEIVED A UNIFORM BUSINESS TO FILE. THEREFORE AS PER YOUR
INSTRUCTIONS BY TELEPHONE TODAY WE ARE ENCLOSING YOUR
NORMAL FEE OF \$150.00: ALONG WITH THE REPORT.

THANK YOU FOR YOUR HELP



DEBORAH E. KHAN

pres. K&L