

FILED
Mar 27, 2001 8:00 am
Secretary of State

03-27-2001 90671 048 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000117804

1. Entity Name
BVH DEVELOPMENT, INC.

Principal Place of Business
1430 KENILWORTH STREET
SARASOTA, FL 34231

Mailing Address
PO BOX 5722
SARASOTA, FL 34277-5722

A0038403

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
65-1071815

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

SEIDER, WILLIAM M.
200 SOUTH ORANGE AVENUE
SARASOTA, FL 34236

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 re-registering)

DATE

March 5, 2001

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 \$160.00
After MAY 1, 2001 Fee will be \$350.00
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	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN-11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	☐ Change ☒ Addition
DP	MORRIS, ROBERT A., JR.	1430 KENILWORTH ST.	SARASOTA, FL 34231	
D	CARRION, JAIME S.	3665 BEE RIDGE RD.	SARASOTA, FL 34233	
ST	MCSWEENEY, ANINA C.	3665 BEE RIDGE RD.	SARASOTA, FL 34233	

CR2034 (11/00)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(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

ROBERT A. MORRIS, JR.

March 5, 2001 941-923-9404

Date

DeVine Phone #