

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 25, 2003 8:00 am
Secretary of State

06-25-2003 90071 011 ***150.00

DOCUMENT # P01000083312

1. Entity Name
VAN HOVE FAMILY LP-GP, INC.



Principal Place of Business
4501 VINELAND ROAD
SUITE 109
ORLANDO FL 32811

Mailing Address
4501 VINELAND ROAD
SUITE 109
ORLANDO FL 32811

2. Principal Place of Business
8744 Bristol Park Dr
Suite, Apt. #, etc.

3. Mailing Address
8744 Bristol Park Dr
Suite, Apt. #, etc.

City & State
Orlando FL

City & State
Orlando FL

4. FEI Number NOT APPLICABLE
Applied For Not Applicable

Zip Country
32836 Orange

Zip Country
32836 Orange

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

6. Name and Address of Current Registered Agent
VAN HOVE, WILLIAM
4501 VINELAND ROAD
SUITE 109
ORLANDO FL 32811

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
8744 Bristol Park Drive
City Orlando FL Zip Code 32836

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. I am familiar with, and accept the obligations of registered agent.
SIGNATURE *[Signature]* DATE 4/23/03
(NOTE: Registered agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VAN HOVE, WILLIAM 4501 VINELAND ROAD ORLANDO FL 32811 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BEZIERE, CATHERINE 4501 VINELAND ROAD ORLANDO FL 32811 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	8744 Bristol Park Dr Orlando FL 32836 ☒ Change ☐ Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.37(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 other empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* DATE 4/23/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Attachment 90140315
DOT# PD100083312

William Van Hove
8744 Bristol Park Drive
Orlando FL 32836

June 19, 2003

Division Of Corporations
Uniform Business Report Filings
PO Box 1500
Tallahassee FL 32302-1500

Re: Copy of Uniform Business Report

Dear Sir or Madam,

Enclosed is a corrected copy of our report as requested. The loss of the original corrected report must be in the hands of our postal employees and lost forever. Thank you for your help in this matter.

Sincerely,

William Van Hove

A handwritten signature in black ink, appearing to read 'W. Van Hove', enclosed within a large, loopy oval scribble.