

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90144 017 ***150.00

DOCUMENT # P01000086513

1. Entity Name

CENTRAL PARK VILLAS, INC.

Principal Place of Business

**1977 DUNDEE DR
WINTER PARK FL 32792**

Mailing Address

**P O BOX 4961
ORLANDO FL 32802-4961**

2. Principal Place of Business

3. Mailing Address

1977 Dundee Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

**City & State
Winter Park , FL**

4. FEI Number

59-3742384

Applied For

Not Applicable

Zip

Country

Zip

Country

32792

Orange

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**B&C CORPORATE SERVICES OF CENTRAL FL, INC.
390 N ORANGE AVE, SUITE 1100
ORLANDO FL 32801**

Name

A & S Development, Inc.

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

1977 Dundee Drive

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.

Shane Acevedo

4/29/02

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, 2002 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
	D	ACEVEDO, SHANE L	1977 DUNDEE DR WINTER PARK FL 32792	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
	D	SHEPHERD, THOMAS H	1977 DUNDEE DR WINTER PARK FL 32792	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Shane L. Acevedo, Director

4/29/02

Date

(407) 657-1113

Daytime Phone #

CR2E034 (9/01)