

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P31336

1. Entity Name

GRAND CYPRESS FLORIDA, INC.

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 AUG -3 AM 10:52

Principal Place of Business

Mailing Address

60 Grand Cypress Blvd.
Orlando, Florida 32836

60 Grand Cypress Blvd.
Orlando, Florida 32836

2. Principal Place of Business

3. Mailing Address

215 North Eola Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Orlando, Fl.

4. FEI Number

99-0282163

Applied For

Not Applicable

Zip

Country

Zip

Country

32802

USA

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Yergler, Jon C.
Lowndes, Drosdick, Doster, Kantor & Reed, P.A.
215 North Eola Drive
Orlando, Fl. 32802

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 \$150.00
After MAY 1, 2001 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 DP
NAME Osano, Masakuni
STREET ADDRESS #12-4 Kaminoge 2- Chome Setagaya-Ku
CITY-ST-ZIP Tokyo 158 JA ☐ Delete

TITLE DP
NAME Osano, Takamasa
STREET ADDRESS 2-9-22 Kaminoge, Setagaya-ku
CITY-ST-ZIP Tokyo 158-0093 Japan ☒ Change ☐ Addition

TITLE DEVP
NAME Takahashi, Stanley
STREET ADDRESS 905 Kapoho PLC
CITY-ST-ZIP Honolulu, HA ☐ Delete

TITLE DSV
NAME Iwuc, Michael
STREET ADDRESS 2205 Nela Avenue
CITY-ST-ZIP Orlando, Florida 32809 ☒ Change ☐ Addition

TITLE DS
NAME Matsumoto, Hisashi
STREET ADDRESS 1717 Mott-Smith Dr., #2414
CITY-ST-ZIP Honolulu, HA ☒ Delete

TITLE DVP
NAME Hayakawa, George S.
STREET ADDRESS 1040 Lunalilo Street
CITY-ST-ZIP Honolulu, Hawaii 96822 ☒ Change ☐ Addition

TITLE DVT
NAME Ebisawa, Mitsuzo
STREET ADDRESS 1245 North Park Ave.
CITY-ST-ZIP Winter Park, FL 32789 ☒ Delete

TITLE DST
NAME Mizokami, Kenji
STREET ADDRESS 11318 Winston Willow Court
CITY-ST-ZIP Windermere, Florida 34786 ☒ Change ☐ Addition

TITLE D
NAME Yamanishi, Tetsuro
STREET ADDRESS #11-14 Suzugaya 3 Chome
CITY-ST-ZIP Yono City, SA ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400004524334--8
-08/08/01--01048--018
****550.00 ****550.00

TITLE DVP
NAME Kochi, David
STREET ADDRESS One North Jaçaranda, #2031
CITY-ST-ZIP Orlando, Florida 32836 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
400004524334--8
-08/08/01--01048--019
****550.00 ****550.00

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, nor does it qualify for the exemption 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

7/31/01

407-239-1929

Date

Phone Number

CR2E034 (11/00)