## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # P35070

1. Entity Name

## **BLUEGREEN CORPORATION**

rincipal Place of Business Mailing Address								
O DEOL CHIC DINIL		4960 BLUE LAKE DRIVE BOCA RATON FL 33431-445	960 BLUE LAKE DRIVE BOCA RATON FL 33431-4453		C0008235			
							1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Principal Place of Business 3. Mailing Address								
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		_	DO NOT WRITE IN THIS	SPACE		
City & State		City & State		<b>4.</b> F	El Number <b>03-0300793</b>	<u> </u>	plied For	
					00 0000730		t Applicable	
Zip 	Country	Zip	Country	5. (	Certificate of Status Desired	\$8.75 Add Fee Required		
	6. Name and Address of Current	   Registered Agent		7. N	ame and Address of New Registered	Agent		
			Name				-	
THI	THE PRENTICE-HALL CORPORATION SYSTEM, INC.			Street Address (P.O. Box Number is Not Acceptable)				
	1 HAYS STREET	•						
SU	TE 105							
TAL	LAHASSEE FL 32301		City		FI	Zip Code	е	
	e named entity submits this statement fo					<u>-</u>		
Tax filing requirement and elects to do so.  After MAY 1, 20			!!! FEE IS \$150.00 100 Fee will be \$550.0 Die to Department of		Election Campaign Financing     Trust Fund Contribution.		May Be to Fees	
	OFFICERS AND		12.		DITIONS/CHANGES TO OFFICERS AN	D DIRECTOR!	S IN 11	
I. TLE	CPD . OFFICERS AND	□ Delete	TITLE			☐ Change	Addition	
ME	DONOVAN, GEORGE F		NAME					
REET ADDRESS			STREET ADDRESS					
TY-ST-ZIP	BOCA RATON FL 33431		CITY-ST-ZIP					
TLE	D	☐ Delete	TITLE			Change	Addition	
ME	MYERS, FREDERICK M.		NAME					
REET ADDRESS	00 11201 011122		STREET ADDRESS					
TY-ST-ZIP	PITTSFIELD MA		CITY-ST-ZIP			Change	Addition	
TLE	D	☐ Delete	TITLE			Change	Addition	
ME	ABELES, JOSEPH C.		NAME STREET ADDRESS					
reet address Ty-St-Zip	1000 025, 01.5 110.15		CITY-ST-ZIP					
	PLEASANTVILLE NY D	□ Delete	TITLE			☐ Change	Addition	
'LE .ME	FOOTE, RALPH A.	C Delete	NAME					
REET ADDRESS			STREET ADDRESS					
TY-ST-ZIP	MIDDLEBURY VT		CITY-ST-ZIP					
LE .	SV Transfer	☐ Delete	TITLE			Change	☐ Addition	
ME	RONDEAU, PATRICK E.		NAME					
REET ADDRESS	4960 BLUE LAKE DR		STREET ADDRESS					
TY-ST-ZIP	BOCA RATON FL 33431		CITY-ST-ZIP					
TLE	T	☐ Delete	TITLE			☐ Change	Addition	
AME	CHISTE, JOHN F		NAME expert address					
TREET ADDRES	S JAGGO RILLE LAKE DR		STREET ADDRESS					

13. I hereby certify that the information supplied with this filling 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.

CITY-ST-ZIP

SIGNATURE:

4960 BLUE LAKE DR

**BOCA RATON FL 33431** 

STREET ADDRESS

CITY-ST-ZIP

Patrick E. Rondeau The Konde Patrick E. Ro SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/5/00

561-912-8005

**FILED** 

Jan 20, 2000 8:00 am Secretary of State

01-20-2000 90238 016 \*\*\*150.00

Daytime Phone #