

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000020670

1. Entity Name

EASTERN 100 TITLE CORPORATION

**FILED**  
**May 02, 2000 8:00 am**  
**Secretary of State**

05-02-2000 90099 013 \*\*\*150.00

Principal Place of Business

Mailing Address

215 5TH STREET

215 5TH STREET

#108

#108

W PALM BEACH FL 33401

W PALM BEACH FL 33401-4026

US

US

2. Principal Place of Business

2000 N. Florida Mango Rd

3. Mailing Address

2000 N. Florida Mango Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#200

#200

City & State

WPB FL

City & State

WPB FL

Zip

33409

Country

Palm Beach

Zip

33409

Country

Palm Beach



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0416491

Applied For

Not Applicable

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

HEATON, LINN

215 5TH STREET

#108

W PALM BEACH FL 33401

Name

Deborah Dentry

Street Address, P.O. Box Number is Not Acceptable

2000 N. Florida Mango Rd

#200

City

WPB

FL

33409

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

Deborah A. Dentry

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/00

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, 2000 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 HEATON, LINN  
STREET ADDRESS 215 5TH ST. #108  
CITY-ST-ZIP W PALM BEACH FL 33409

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
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☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE V.P.  
NAME Leetaton  
STREET ADDRESS 2000 N. Florida Mango Rd #200  
CITY-ST-ZIP WPB FL 33409

☐ Change ☒ Addition

TITLE VP  
NAME Deborah Dentry  
STREET ADDRESS 2000 N. Florida Mango Rd #200  
CITY-ST-ZIP W.P.B. FL 33409

☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ Change ☐ Addition

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:

Deborah A. Dentry

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

4/24/00

Daytime Phone #

561.697.5252

CR2E034 (9/99)