

# 2000 UNIFORM BUSINESS REPORT (UBR)

10f2

**DOCUMENT #** P93000041443  
**1. Entity Name**  
 VINTAGE LAKE, INC

07-24-2000 90007 009 \*\*\*158.75  
 FILED

00 AUG -4 PM 3:52

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

**Principal Place of Business**      **Mailing Address**  
 3643 Cortez Rd W      3643 Cortez Rd W •  
 Suite 110      Suite 110  
 Bradenton, FL 34210      Bradenton, FL 34210

**2. Principal Place of Business**      **3. Mailing Address**  
 1707 71st St NW      PO Box 14820  
 Suite, Apt. #, etc.      Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

**City & State**      **City & State**  
 Bradenton, FL      Bradenton, FL  
**Zip**      **Country**      **Zip**      **Country**  
 34209           34280          

**4. FEI Number**      **Applied For**  
 65-0430506      Not Applicable

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

**6. Name and Address of Current Registered Agent**  
 Conard, Richard T  
 3642 Cortez Rd W #110  
 Bradenton, FL 34210

**7. Name and Address of New Registered Agent**  
**Name**      Richard T Conard  
**Street Address (P.O. Box Number is Not Acceptable)**  
 1707 71st St NW  
**City**      Bradenton      **FL**      **Zip Code**      34209

**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**      *Richard T Conard*      **Richard T Conard**  
 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, 2000 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

| 11. OFFICERS AND DIRECTORS |                                 |  |
|----------------------------|---------------------------------|--|
| TITLE                      | <input type="checkbox"/> Delete |  |
| NAME                       | DP Conard, Richard              |  |
| STREET ADDRESS             | 3643 Cortez Rd W #110           |  |
| CITY-ST-ZIP                | Bradenton, FL 34210             |  |
| TITLE                      | <input type="checkbox"/> Delete |  |
| NAME                       | VPD Conard, Betty A             |  |
| STREET ADDRESS             | 3643 Cortez Rd W #110           |  |
| CITY-ST-ZIP                | Bradenton, FL 34210             |  |
| TITLE                      | <input type="checkbox"/> Delete |  |
| NAME                       |                                 |  |
| STREET ADDRESS             |                                 |  |
| CITY-ST-ZIP                |                                 |  |
| TITLE                      | <input type="checkbox"/> Delete |  |
| NAME                       |                                 |  |
| STREET ADDRESS             |                                 |  |
| CITY-ST-ZIP                |                                 |  |
| TITLE                      | <input type="checkbox"/> Delete |  |
| NAME                       |                                 |  |
| STREET ADDRESS             |                                 |  |
| CITY-ST-ZIP                |                                 |  |

| 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |                                                                              |  |
|-------------------------------------------------------|------------------------------------------------------------------------------|--|
| TITLE                                                 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| NAME                                                  |                                                                              |  |
| STREET ADDRESS                                        | 1707 71st St NW                                                              |  |
| CITY-ST-ZIP                                           | Bradenton, FL 34209                                                          |  |
| TITLE                                                 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |  |
| NAME                                                  |                                                                              |  |
| STREET ADDRESS                                        | 1707 71st St NW                                                              |  |
| CITY-ST-ZIP                                           | Bradenton, FL 34209                                                          |  |
| TITLE                                                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |  |
| NAME                                                  |                                                                              |  |
| STREET ADDRESS                                        |                                                                              |  |
| CITY-ST-ZIP                                           |                                                                              |  |
| TITLE                                                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |  |
| NAME                                                  |                                                                              |  |
| STREET ADDRESS                                        |                                                                              |  |
| CITY-ST-ZIP                                           |                                                                              |  |
| TITLE                                                 | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |  |
| NAME                                                  |                                                                              |  |
| STREET ADDRESS                                        |                                                                              |  |
| CITY-ST-ZIP                                           |                                                                              |  |

CR2E034 (9/99)

**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:**      *Richard T Conard*      **Richard T Conard**      **Date**      6/16/02      **Daytime Phone #**      941-792-6800

KE



G25094

AVAILABLE 25  
A0068669  
A0068670  
A0068671  
A0068672

June 16, 2000

Department of State  
Division of Corporations  
PO Box 1500  
Tallahassee, FL 32302

To Whom It May Concern:

Enclosed please find Uniform Business Reports for C&D Properties, Inc, Conard BAC Corp, Conard RTC Corp and Vintage Lakes, Inc. with a check in the amount of \$158.75 for each. We had a change of address in February of this year and were informed when calling the office for the Division of Corporations that these forms are not forwarded by the post office. After several calls to request blank forms, one of your representatives finally mailed some out with assurances that the late filing fee was not necessary. Thank you.

Sincerely,

  
RT Conard

Attachment

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418882

447176

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