

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P93000047481**

1. Entity Name

ARBOR TRACE REALTY, INC.

FILED
Apr 24, 2000 08:00 AM
Secretary of State

Principal Place of Business

1000 ARBOR LAKE DRIVE

Mailing Address

1000 ARBOR LAKE DRIVE

NAPLES

FL

34110

US

NAPLES

FL

34110

US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0419634

Applied For

Not Applicable

5. Certificate of Status Desired

☒**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

STRANGE J L
1000 ARBOR LAKE DRIVE

NAPLES

FL

34110

US

7. Name and Address of New Registered Agent

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)

04/24/2000

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 State10. Election Campaign Financing
Trust Fund Contribution.☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE S ☐ Delete
NAME RIZK LISA M
STREET ADDRESS 1000 ARBOR LAKE DRIVE
CITY-ST-ZIP NAPLES FLTITLE DVP ☐ Delete
NAME PETIT PARKER H
STREET ADDRESS 1850 PARKWAY PL
CITY-ST-ZIP MARIETTA GATITLE DPT ☐ Delete
NAME STRANGE J.L.
STREET ADDRESS 4355 SHACKLEFORD ROAD
CITY-ST-ZIP NORCROSS GATITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S ☒ Change ☐ Addition
NAME RIZK LISA M
STREET ADDRESS 1000 ARBOR LAKE DRIVE
CITY-ST-ZIP NAPLES FL 34110TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: LISA M. RIZK

04/24/2000