

**2000 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # P93000047483**

1. Entity Name

ARBOR TRACE SERVICE CENTER, INC.

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

Principal Place of Business

1000 ARBOR LAKE DRIVE

NAPLES  
33963

FL

Mailing Address

1000 ARBOR LAKE DRIVE

NAPLES  
33963

FL

2. Principal Place of Business

1000 ARBOR LAKE DRIVE

3. Mailing Address

1000 ARBOR LAKE DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City &amp; State

NAPLES

FL

City &amp; State

NAPLES

FL

4. FEI Number

65-0419629

Applied For

Not Applicable

Zip  
34110

Country

Zip  
34110

Country

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

STRANGE J L  
1000 ARBOR LAKE DRIVENAPLES  
33963

US

FL

Name

STRANGE J L

Street Address (P.O. Box Number is Not Acceptable)

1000 ARBOR LAKE DRIVE

City

NAPLES

FL

Zip Code  
34110

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 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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
RIZIK LISA M  
1000 ARBOR LAKE DR  
NAPLES FL  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
RIZIK LISA M  
1000 ARBOR LAKE DR  
NAPLES FL  
☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
PETT PARKER H  
1850 PARKWAY PLACE  
MARIETTA GA  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
PETIT PARKER H  
1850 PARKWAY PLACE  
MARIETTA GA  
☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
RIZIK LISA M  
1000 ARBOR LAKE DRIVE  
NAPLES FL 34110  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DVPT  
STRANGE J L  
1000 ARBOR LAKE DRIVE  
NAPLES FL 34110  
☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ DeleteTITLE  
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: LISA M. RIZIK

04/24/2000