

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P93000087615

1. Entity Name

BVWD HOTEL II, INC.

FILED
Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90044 037 ***150.00

Principal Place of Business

800 TRAFALGAR COURT
SUITE 200
MAITLAND FL 32751
US

Mailing Address

800 TRAFALGAR COURT
SUITE 200
MAITLAND FL 32751-7419
US

A0027314



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-3219939

Applied For

Not Applied

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PIPKORN, TIMOTHY G
800 TRAFALGAR COURT
SUITE 200
MAITLAND FL 32751

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)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
CD	BROWN, GARY E	800 TRAFALGAR COURT, #200	MAITLAND FL 32751	<input type="checkbox"/>
STD	VON WELLER, HAROLD J	800 TRAFALGAR COURT, #200	MAITLAND FL 32751	<input type="checkbox"/>
PD	DAVIS, STEVEN S	800 TRAFALGAR COURT, #200	MAITLAND FL 32751	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Add
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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 changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

Gary E Brown 2-11-00 407-475-0800