

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000024290

1. Entity Name

MANDARIN RIDGE DEVELOPMENT CORPORATION

FILED
Sep 18, 2000 8:00 am
Secretary of State

09-18-2000 90014 026 ***550.00

Principal Place of Business

Mailing Address

~~325 W. ADAMS ST.~~
~~SUITE 302~~
~~JACKSONVILLE FL 32202~~
 US

~~325 W. ADAMS ST.~~
~~SUITE 302~~
~~JACKSONVILLE FL 32202~~
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc. **EMB 103**
11018-113 St. Augustine Road

Suite, Apt. #, etc. **EMB 103**
11018-113 St. Augustine Road

City & State
Jacksonville, Florida

City & State
Jacksonville, Florida

Zip
32257-1080

Country
USA

Zip
32257-1080

Country
USA

4. FEI Number **59-3234408**

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

MOLASSO, JOHN
~~325 W. ADAMS ST.~~
~~SUITE 302~~
~~JACKSONVILLE FL 32202~~
11247 San Jose Blvd., #414
Jacksonville, FL 32223

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 **JOHN MOLASSO**

September 13, 2000

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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	P	<input type="checkbox"/> Delete
NAME	MARSHALL, CHARLES E SR	
STREET ADDRESS	325 W. ADAMS ST. #302	
CITY-ST-ZIP	JACKSONVILLE FL 32202	
TITLE	V	<input type="checkbox"/> Delete
NAME	MOLASSO, JOHN	
STREET ADDRESS	325 W. ADAMS ST. #302	
CITY-ST-ZIP	JACKSONVILLE FL 32202	
TITLE	VS	<input type="checkbox"/> Delete
NAME	WARREN, JOSEPH E.	
STREET ADDRESS	1930 SAN MARCO BLVD	
CITY-ST-ZIP	JACKSONVILLE FL	
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		

TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	1745 Woodside Drive
CITY-ST-ZIP	Thousand Oaks, CA 93162
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	11247 San Jose Blvd., #414
CITY-ST-ZIP	Jacksonville, Florida 32223
TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	2503 Dean Road
CITY-ST-ZIP	Jacksonville, Florida 32216
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	

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 another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH E. WARREN, Vice President

September 13, 2000 (904) 724-4526

Date

Daytime Phone #

CR2E034 (5/00)