

2000 UNIFORM BUSINESS REPORT (UBR)

4/7/00/2000-010-010000-010000

DOCUMENT # P94000051477

1. Entity Name

ARBORETUM CORPORATION

FILED

00 MAR -9 PM 2: 15

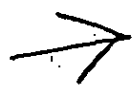
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

9200 BONITA BEACH ROAD
SUITE 101A
BONITA SPRINGS FL 34135
US

Mailing Address

9200 BONITA BEACH ROAD
SUITE 101A
BONITA SPRINGS FL 34135-4277
US



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

8951 Bonita Beach Rd

#525-212

Bonita Springs

34135

4. FEI Number

65-0509691

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ROSENTHAL, ~~WILLIAM~~ WILLIAM
9200 BONITA BEACH RD.
SUITE 101A
BONITA SPRINGS FL 34135

7. Name and Address of New Registered Agent

Name WILLIAM ROSENTHAL
Street Address (P.O. Box Number is Not Acceptable)
9200 - BONITA BEACH RD 101-A
City BONITA SPRINGS FL Zip Code 34135

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

William Rosenthal

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-28-2000

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, 2003 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

TITLE	PD	<input type="checkbox"/> Delete
NAME	ROSENTHAL, SYLVIA	
STREET ADDRESS	9748 TREASURE CAY LANE	
CITY-ST-ZIP	BONITA SPRINGS FL	
TITLE	TD	<input type="checkbox"/> Delete
NAME	ROSENTHAL, WILLIAM	
STREET ADDRESS	4071 WILLIAMS ROAD	
CITY-ST-ZIP	ESTERO FL	
TITLE	V	<input checked="" type="checkbox"/> Delete
NAME	BRIDGES, GLENN	
STREET ADDRESS	5201 31ST PLACE SW	
CITY-ST-ZIP	NAPLES FL 34116	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	ROSENTHAL, KEVIN	
STREET ADDRESS	7594 LAUREL VALLEY	
CITY-ST-ZIP	FT. MYERS FL 33912	
TITLE	VP	<input type="checkbox"/> Delete
NAME	MORRILL, RICHARD A	
STREET ADDRESS	933-ADEPHI CT	
CITY-ST-ZIP	FT MYERS FL 33919	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sylvia Rosenthal	
STREET ADDRESS	214 Topango Drive	
CITY-ST-ZIP	Bonita Springs, FL 34134	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OUR NEW MAILING ADDRESS IS:	
STREET ADDRESS	ARBORETUM CORP.	
CITY-ST-ZIP	8951-BONITA BEACH RD	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	#525-212	
STREET ADDRESS	BONITA SPRINGS, FL	
CITY-ST-ZIP	34135	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(5)(b) Florida Statutes, and 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:

SIGNATURE REQUIRED

William Rosenthal

3/6/2000

941-992-1623

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)