

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P94000054744 (5)

1. Corporation Name

U.W.C. MAINTENANCE CORPORATION

Principal Place of Business

2000 PALM BEACH LAKES BLVD SUITE 500  
WEST PALM BEACH FL 33464

Mailing Address

2000 PALM BEACH LAKES BLVD SUITE 500  
WEST PALM BEACH FL 33464



2. Principal Place of Business

21 2090 Palm Beach Lakes Blvd

2a. Mailing Address

26 2090 Palm Beach Lakes Blvd

3. Date incorporated or Qualified  
07/25/1994

3a. Date of Last Report  
04/04/1995

4. FEI Number

65-0555703

Applied For  
Not Applicable

Suite, Apt. #, etc.

22 Suite 200

City & State

23 West Palm Beach, FL

Zip

24 33409

Country

25 US

City & State

27 Suite 200

City & State

28 West Palm Beach, FL

Zip

29 33409

Country

30 US

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HERRING, HERB F

2000 PALM BEACH LAKES BLVD SUITE 500  
WEST PALM BEACH FL 33464

81 Name

Patricia B. Dean

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

2235 Okeechobee Blvd.

83

84 West Palm Beach

FL

85 Zip Code  
33409

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

5-13-96

12. OFFICERS AND DIRECTORS

TITLE D HERRING, HERB F ☒ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP  
11017 NW 28TH ST  
CORAL SPRINGS FL 33065

TITLE BX ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D  
Patricia B. Dean

2235 Okeechobee Blvd.  
West Palm Beach, FL 33409

D/CFO

Glen Frye

2090 Palm Beach Lakes Blvd., #200  
West Palm Beach, FL 33409

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-05/25/96--01004--020  
\*\*\*225.00

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-1-96

407-478-2440

Date

Daytime Phone #

CR2E034 (12/95)