

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000092483

1. Entity Name
ORIOLE OF NAPLES, INC.

Principal Place of Business Mailing Address
1690 SO. CONGRESS AVENUE STE. 200 1690 SO. CONGRESS AVENUE STE. 200
DELRAY BEACH FL 33445 DELRAY BEACH FL 33445

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 65-0551606

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

PIVINSKI, JOSEPH
1690 SO. CONGRESS AVENUE STE. 200
DELRAY BEACH FL 33445

Name Pivinski, Joseph
C/O Oriole Homes Corp.
Street Address (P.O. Box Number is Not Acceptable)
1690 S Congress Avenue STE 200
City Delray Beach FL Zip 33445

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) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 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 CD ☐ Delete
NAME LEVY, RICHARD D.
STREET ADDRESS 1690 S. CONGRESS AVE STE 200
CITY-ST-ZIP DELRAY BEACH FL

TITLE PD ☐ Delete
NAME LEVY, MARK A.
STREET ADDRESS 1690 S. CONGRESS AVE STE 200
CITY-ST-ZIP DELRAY BEACH FL

TITLE VT ☐ Delete
NAME PIVINSKI, JOSEPH
STREET ADDRESS 1690 S. CONGRESS AVE. STE 200
CITY-ST-ZIP DELRAY BEACH FL 33445

TITLE SD ☐ Delete
NAME LEVY, HARRY A.
STREET ADDRESS 1690 S. CONGRESS AVE STE 200
CITY-ST-ZIP DELRAY BEACH FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 all other like empowered.

SIGNATURE:

J. Pivinski

J. Pivinski

3/26/2001

561-274-2000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 21, 2001 8:00 am
Secretary of State

05-21-2001 90369 035 ***150.00



DO NOT WRITE IN THIS SPACE

0314054

CR2E034 (10/00)