

# 2000 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 03, 2000 8:00 am**  
**Secretary of State**

03-03-2000 90030 044 \*\*\*150.00

DOCUMENT # P95000022077

1. Entity Name

NEW ENGLAND AVENUE DEVELOPMENT COMPANY

Principal Place of Business

Mailing Address

425 W. NEW ENGLAND AVE.  
#300  
WINTER PARK FL 32789  
US

P.O. BOX 350  
WINTER PARK FL 32790-0350  
US

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

59-3303282

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

Name

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

City

FL

Zip Code

BELLOWS, DANIEL B.  
425 W. NEW ENGLAND AVE.  
#300  
WINTER PARK FL 32789

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, 2000 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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	MAHER, STEVEN R	
STREET ADDRESS	90 E. LIVINGSTON ST.	
CITY-ST-ZIP	ORLANDO FL 32801	
TITLE	VPST	<input type="checkbox"/> Delete
NAME	BELLOWS, DANIEL B	
STREET ADDRESS	P.O. BOX 350	
CITY-ST-ZIP	WINTER PARK FL 32790-0350	
TITLE		<input type="checkbox"/> Delete
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TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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CITY-ST-ZIP		

C:\P2E034 (9/99)

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:

*Daniel B Bellows VP*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/10/2000

407-644-3151