

## 2000 UNIFORM BUSINESS REPORT (UBR)

7/10

**FILED**  
**Aug 02, 2000 8:00 am**  
**Secretary of State**

08-02-2000 90148 032 \*\*\*400.00

07-10-2000 90014 011 \*\*\*150.00

DOCUMENT # 000028048

Entity Name

WELBRO Development, Inc.

R

Principal Place of Business

Mailing Address

800 Trafalgar Ct.  
 Suite:200  
 Maitland, FL 32751

800 Trafalgar Ct.  
 Suite:200  
 Maitland, FL 32751

Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

59-3314350

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

Brown, Gary E.  
 800 Trafalgar Court, #200  
 Maitland, FL 32751

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

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

AND MAY 1, 2000 FEE WILL BE \$50.00

Make Check Payable to Department of State

10. Election Campaign Financing  
 Trust Fund Contribution. ☐

\$5.00 May Be  
 Added to Fees

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

STCD ☐ Delete  
 Brown, Gary E  
 800 Trafalgar Court, #200  
 Maitland, FL 32751 ☐ Delete  
 V  
 Davis, Steven S  
 800 Trafalgar Court, #200  
 Maitland, FL 32751 ☐ Delete  
 P  
 Schrank, Edward L  
 800 Trafalgar Court #200  
 Maitland, FL 32751 ☐ Delete

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change☐ Addition

TITLE

NAME

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CITY-ST-ZIP

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☐ Change☐ Addition

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

☐ Change☐ Addition

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:

Gary E. Brown

6/7/00

407-475-0800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)