

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000028473

1. Entity Name

POINTE VISTA, INC.

Principal Place of Business

3300 S. HIAWASSEE ROAD, SUITE 107
ORLANDO FL 32835

Mailing Address

PO BOX 4961
ORLANDO FL 32802-4961
US

2. Principal Place of Business

800 N. HIGHLAND AVE.

3. Mailing Address

Suite, Apt. #, etc.

SUITE 200

City & State
ORLANDO, FL

City & State

Zip

32803

Country

USA

Country

4. FEI Number

59-3377554

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLA, INC
390 N. ORANGE AVENUE., STE 1100
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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.

LS

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

TITLE VS
NAME CARLTON, CHARLES
STREET ADDRESS 3300 S. HIAWASSEE ROAD, SUITE 107
CITY-ST-ZIP ORLANDO FL 32835 ☐ Delete

TITLE VT
NAME KROPP, STEVEN G
STREET ADDRESS 3200 S. HIAWASSEE ROAD, SUITE 206
CITY-ST-ZIP ORLANDO FL 32835 ☐ Delete

TITLE VPAS
NAME MCKINNEY, EUGENE J
STREET ADDRESS 3200 S. HIAWASSEE ROAD, SUITE 206
CITY-ST-ZIP ORLANDO FL 32835 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS 800 N. HIGHLAND AVE., SUITE 200
CITY-ST-ZIP ORLANDO, FL 32803 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 800 N. HIGHLAND AVE., SUITE 200
CITY-ST-ZIP ORLANDO, FL 32803 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 800 N. HIGHLAND AVE., SUITE 200
CITY-ST-ZIP ORLANDO, FL 32803 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS 4000003178324--0
CITY-ST-ZIP -03/21/00--01101--012 ☐ Change ☐ Addition
****150.00 ****150.00

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

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

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: STEVEN G. KROPP
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
STEVEN G. KROPP, VICE PRESIDENT

3-1-00 407/297-1600
Date Daytime Phone #

CR2E034 (9/99)