

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000040981

1. Entity Name

WELCOME HOMES MANAGEMENT, INC.

FILED

Apr 24, 2001 8:00 am
Secretary of State

04-24-2001 90346 001 ***150.00

Principal Place of Business

3146 VINELAND RD SR 535
KISSIMMEE FL 34746
US

Mailing Address

1106 W OAK ST
KISSIMMEE FL 34741
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

200 E. ROBINSON STREET

SUITE 500

ORLANDO, FLORIDA

32801

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3389607

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

MCCORMACK, ANNE-MARIE
3146 VINELAND RD SR 535
KISSIMMEE FL 34746

Name

FLORIDA CORPORATE SUPPORT, INC.

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

200 E. ROBINSON STREET

SUITE 500

City

ORLANDO

FL

Zip Code

32801

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE S
NAME MEDINA, SARA L
STREET ADDRESS 2319 MILLBANK DR
CITY-ST-ZIP ORLANDO FL 32837 ☒ Delete

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

TITLE VPS
NAME MCCORMACK, ANNE-MARIE
STREET ADDRESS 1106 W OAK STREET
CITY-ST-ZIP KISSIMMEE FL 34741 ☐ Delete

TITLE P/S/D
NAME
STREET ADDRESS 3146 Vineland Road, S.R. 535
CITY-ST-ZIP KISSIMMEE, FL 34746 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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: AMM McCormack
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/23/2001 407-390-9000

CR2E034 (10/00)