

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P95000044143

1. Entity Name

LES CHATEAUX DEVELOPERS, INC.

**FILED**  
**Mar 09, 2000 8:00 am**  
**Secretary of State**

03-09-2000 90111 021 \*\*\*150.00

Principal Place of Business

3838 TAMiami TRAIL NO. STE 410  
NAPLES FL 34103  
US

Mailing Address

3838 TAMiami TRAIL NO STE 410  
NAPLES FL 34108-8903  
US

2. Principal Place of Business

1100 PINE RIDGE ROAD  
Suite, Apt. #, etc.

3. Mailing Address

1100 PINE RIDGE ROAD  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

NAPLES, FL

City & State

NAPLES, FLORIDA

4. FEI Number

65-0598444

Applied For

Not Applicable

Zip

Country

34108-8903

Zip

Country

34108-8903

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

CONROY, J. THOMAS I  
3838 TAMiami TR N  
SUITE 402  
NAPLES FL 34103

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.

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 PSTD  
NAME KESSOUS, MICHAEL  
STREET ADDRESS 3838 TAMiami TRAIL N STE 410  
CITY-ST-ZIP NAPLES FL

☐ Delete

TITLE V  
NAME KESSOUS, MICHAEL  
STREET ADDRESS 3838 TAMiami TRAIL NO. STE 410  
CITY-ST-ZIP NAPLES FL

☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
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STREET ADDRESS  
CITY-ST-ZIP

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TITLE PSTD  
NAME KESSOUS, MICHAEL  
STREET ADDRESS 1100 PINE RIDGE ROAD  
CITY-ST-ZIP NAPLES, FL 34108-8903

☒ Change ☐ Addition

TITLE V  
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☒ Change ☐ Addition

TITLE  
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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: X   
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 2/25/00  
Date

X 941-649-1230  
Daytime Phone #

CR2E034 (9/99)