

2000 UNIFORM BUSINESS REPORT (UBR)

CI

FILED**Jan 18, 2000 8:00 am**
Secretary of State

01-18-2000 90002 004 ***150.00

DOCUMENT # P95000056441

1. Entity Name

WATERSIDE CUSTOM HOMES OF SOUTHWEST FLORIDA, INC

Principal Place of Business

Mailing Address

**3013 DEL PRADO BOULEVARD
SUITE 3
CAPE CORAL FL 33904
US****P.O. BOX 834
CAPE CORAL FL 33910-0700
US**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

P.O. Box 100834

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Cape Coral, FL 33910

4. FEI Number

65-0605084

Applied For

Not Applicable

Zip

Country

33910**Lee**

Zip

Country

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**ZLOBL, ROBERT S
3013 DEL PRADO BOULEVARD
SUITE 3
CAPE CORAL FL 33904**

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.

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	NAME	STREET ADDRESS	CITY - ST - ZIP	TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
PSD	ZLOBL, ROBERT S	3013 DEL PRADO BOULEVARD, SUITE 3	CAPE CORAL FL 33904				
VD	ZLOBL, TRACYE L	3013 DEL PRADO BOULEVARD, SUITE 3	CAPE CORAL FL 33904				
VP	FERREIRA, FRANK	3013 DEL PRADO BLVD. #3	CAPE CORAL FL 33904				

3. 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.

CR2E034 (9/99)