

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000009114

1. Entity Name

THREE DEVELOPMENT COMPANY

**FILED**  
**May 03, 2000 8:00 am**  
**Secretary of State**

05-03-2000 90035 024 \*\*\*158.75

Principal Place of Business

Mailing Address

1555 PALM BEACH LAKES BLVD.  
SUITE 1100  
W. PALM BEACH FL 33401

1555 PALM BEACH LAKES BLVD.  
SUITE 1100  
W. PALM BEACH FL 33401-2328

2. Principal Place of Business  
357 Hiatt Drive

3. Mailing Address  
357 Hiatt Drive

Suite, Apt. #, etc.  
Suite A

Suite, Apt. #, etc.  
Suite A

City & State  
Palm Beach Gardens, FL

City & State  
Palm Beach Gardens, FL

4. FEI Number 65-0642443

Applied For  
Not Applicable

Zip  
33418

Country  
U.S.

Zip  
33418

Country  
U.S.

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

ECCLESTONE, E. LLWYD III  
1555 PALM BEACH LAKES BLVD.  
SUITE 1100  
W. PALM BEACH FL 33401

Name E. LLWYD ECCLESTONE, III

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

Suite A

City Palm Beach Gardens FL Zip Code 33418

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 DPT ☐ Delete  
NAME ECCLESTONE, E. LLWYD III  
STREET ADDRESS 1555 PALM BEACH LAKES BLVD., SUITE 1100  
CITY-ST-ZIP W. PALM BEACH FL

TITLE DP ☒ Change ☐ Addition  
NAME E. Llwyd Ecclestone, III  
STREET ADDRESS 357 Hiatt Drive, Suite A  
CITY-ST-ZIP Palm Beach Gardens, FL 33418

TITLE S ☒ Delete  
NAME GAMMON, NANNETTE  
STREET ADDRESS 1555 PALM BEACH LAKES BLVD. #1100  
CITY-ST-ZIP W. PALM BEACH FL

TITLE ☐ Change ☒ Addition  
NAME Rosanne Piretti, SECRETARY  
STREET ADDRESS 357 Hiatt Drive, Suite A  
CITY-ST-ZIP Palm Beach Gardens, FL 33418

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME Gary Thomas, VICE PRESIDENT  
STREET ADDRESS 357 Hiatt Drive, Suite A  
CITY-ST-ZIP Palm Beach Gardens, FL 33418

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition  
NAME Joseph Hagelin, TREASURER  
STREET ADDRESS 357 Hiatt Drive, Suite A  
CITY-ST-ZIP Palm Beach Gardens, FL 33418

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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:

E. L. Ecclestone III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/00

Date

561-627-1270

Daytime Phone #

CR2E034 (9/99)