

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000020150

1. Entity Name

PLANTATION OAKS OF FLAGLER, INC.

FILED
Apr 20, 2000 8:00 am
Secretary of State

04-20-2000 90036 040 ***158.75

Principal Place of Business

Mailing Address

1 PLANTATION OAKS BLVD
FLAGLER BEACH FL 32136
US

PO BOX 1290
FLAGLER BEACH FL 32136-1290
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

FLAGLER BEACH FL

Zip

Country

Zip

Country

4. FEI Number 59-3371771

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

MYNCHENBERG, PARKER
1729 RIDGEWOOD AVE.
HOLLY HILL FL 32117

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 DP ☐ Delete
NAME MYNCHENBERG, PARKER K
STREET ADDRESS 2990 SOUTH ATLANTIC AVENUE STE 3
CITY-ST-ZIP DAYTONA BEACH SHORES FL 32118

TITLE DP ☒ Change ☐ Addition
NAME MYNCHENBERG, PARKER K
STREET ADDRESS 1729 RIDGEWOOD AVE
CITY-ST-ZIP HOLLY HILL FL 32117

TITLE D ☐ Delete
NAME BLEDSOE, JAMES RONNIE
STREET ADDRESS 9528 BIG TREE ROAD
CITY-ST-ZIP SOUTH DAYTONA FL 32019

TITLE DVP ☒ Change ☐ Addition
NAME BLEDSOE, JAMES RONNIE
STREET ADDRESS 952B BIG TREE ROAD
CITY-ST-ZIP SOUTH DAYTONA FL 32121

TITLE D ☐ Delete
NAME BLEDSOW, LORF L
STREET ADDRESS 9528 BIG TREE ROAD
CITY-ST-ZIP SOUTH DAYTONA FL 32019

TITLE DVP ☒ Change ☐ Addition
NAME BLEDSOE, LORE L
STREET ADDRESS 952B BIG TREE ROAD
CITY-ST-ZIP SOUTH DAYTONA FL 32121

TITLE VST ☐ Delete
NAME CARLSON, DONNA
STREET ADDRESS 1729 RIDGEWOOD AVE
CITY-ST-ZIP HOLLY HILL FL 32117

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

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: *Donna Carlson* SIGNATURE REQUIRED

4-13-2000

904-439-2201

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)