

2000 UNIFORM BUSINESS REPORT (UBR)

0344677

DOCUMENT # P96000032706

1. Entity Name

GWD WEST PALM III, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

00 SEP 29 PM 2:45

Principal Place of Business
9055 IBIS BLVD
WEST PALM BEACH FL 33412

Mailing Address
9055 IBIS BLVD
WEST PALM BEACH FL 33412-1325

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0667345

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

INTRASTATE REGISTERED AGENT CORPORATION
701 BRICKELL AVE
SUITE 3000
MIAMI FL 33131

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 PD
NAME DILLON, THOMAS H
STREET ADDRESS 9055 IBIS BLVD
CITY-ST-ZIP W PALM BCH FL

TITLE VP
NAME WILSON, CLIFFORD G
STREET ADDRESS 9055 IBIS BLVD
CITY-ST-ZIP W PALM BCH FL

TITLE VPD
NAME GALE, STANLEY C
STREET ADDRESS 9055 IBIS BLVD
CITY-ST-ZIP W PALM BCH FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPSD
NAME WENTWORTH, FRANCIS X JR
STREET ADDRESS 9055 IBIS BLVD
CITY-ST-ZIP W PALM BCH FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD
NAME SCHIAVONE, CHRISTOPHER R
STREET ADDRESS 9055 IBIS BLVD
CITY-ST-ZIP W PALM BCH FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS
NAME KITSON, SYDNEY W
STREET ADDRESS 9055 IBIS BLVD
CITY-ST-ZIP W PALM BCH FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE AS
NAME THORPE, JONATHON G
STREET ADDRESS 9055 IBIS BLVD
CITY-ST-ZIP W PALM BCH FL

TITLE
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)