

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 03, 2000 08:00 AM
Secretary of State****DOCUMENT # P96000055359****1. Entity Name**
FPL MAMONAL, INC.**Principal Place of Business**

700 UNIVERSE BOULEVARD

JUNO BEACH
33408

FL

Mailing Address

ATTN: FRANCES M. CARPENTER

700 UNIVERSE BOULEVARD

JUNO BEACH
33408

FL

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

ATTN: RITA W. COSTANTINO

Suite, Apt. #, etc.

700 UNIVERSE BOULEVARD

JUNO BEACH
33408

FL

Zip

Country

4. FEI Number**65-0683833**

Applied For

Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered AgentLEON J E
9250 WEST FLAGLER STREETMIAMI FL
33174 US**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)

03/03/2000

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**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME AS
TANCER EDWARD F
STREET ADDRESS 700 UNIVERSITY BLVD.
CITY-ST-ZIP JUNO BEACH FL 33408TITLE ☐ Delete
NAME S
CARPENTER FRANCES M
STREET ADDRESS 700 UNIVERSITY BLVD.
CITY-ST-ZIP JUNO BEACH FL 33408TITLE ☐ Delete
NAME DT
BOYLAN PETER D
STREET ADDRESS 700 UNIVERSITY BLVD.
CITY-ST-ZIP JUNO BEACH FL 33408TITLE ☐ Delete
NAME DV
HOFFMAN KENNETH P
STREET ADDRESS 700 UNIVERSITY BLVD.
CITY-ST-ZIP JUNO BEACH FL 33408TITLE ☐ Delete
NAME AS
LEIGHTON MICHEAL L
STREET ADDRESS 700 UNIVERSITY BLVD.
CITY-ST-ZIP JUNO BEACH FL 33408**12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**TITLE ☐ Change ☒ Addition
NAME DP
YACKIRA MICHAEL W
STREET ADDRESS 700 UNIVERSE BOULEVARD
CITY-ST-ZIP JUNO BEACH FL 33408TITLE ☒ Change ☐ Addition
NAME S
TANCER EDWARD F
STREET ADDRESS 700 UNIVERSE BLVD.
CITY-ST-ZIP JUNO BEACH FL 33408TITLE ☒ Change ☐ Addition
NAME AS
COSTANTINO RITA W
STREET ADDRESS 700 UNIVERSE BLVD.
CITY-ST-ZIP JUNO BEACH FL 33408TITLE ☒ Change ☐ Addition
NAME DT
SAMIL DILEK L
STREET ADDRESS 700 UNIVERSE BLVD.
CITY-ST-ZIP JUNO BEACH FL 33408TITLE ☒ Change ☐ Addition
NAME DV
HOFFMAN KENNETH P
STREET ADDRESS 700 UNIVERSE BLVD.
CITY-ST-ZIP JUNO BEACH FL 33408TITLE ☒ Change ☐ Addition
NAME V
LEIGHTON MICHEAL L
STREET ADDRESS 700 UNIVERSE BLVD.
CITY-ST-ZIP JUNO BEACH FL 33408**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** RITA W. COSTANTINO

AS 03/03/2000