

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 27, 2001 08:00 AM
Secretary of State

DOCUMENT # P96000057152

1. Entity Name
WINTER PARK INVESTMENT PROPERTIES, INC.

Principal Place of Business
1411 TROVILLION AVE.
WINTER PARK FL 32789

Mailing Address
1411 TROVILLION AVE.
WINTER PARK FL 32789

2. Principal Place of Business
1947 LEE ROAD
Suite, Apt. #, etc.

3. Mailing Address
1947 LEE ROAD
Suite, Apt. #, etc.

City & State
WINTER PARK FL

City & State
WINTER PARK FL

Zip Country
32789

4. FEI Number
59-3391779

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 Agent

TURNER COREY W
1411 TROVILLION AVE.
WINTER PARK FL 32789

7. Name and Address of New Registered Agent

Name
TURNER COREY W

Street Address (P.O. Box Number is Not Acceptable)
1947 LEE ROAD

City
WINTER PARK FL

Zip Code
32789

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 COREY TURNER

04/27/2001

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, 2001 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	PTS	<input type="checkbox"/> Delete
NAME	TURNER COREY	
STREET ADDRESS	1411 TROVILLION AVE.	
CITY-ST-ZIP	WINTER PARK FL 32789	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> 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: COREY TURNER

P

04/27/2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/00)