

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000087184

1. Entity Name
WINGATE OF ORLANDO, INC.

Principal Place of Business
6301 WESTWOOD BLVD.
ORLANDO FL 32821
US

Mailing Address
6301 WESTWOOD BLVD.
ORLANDO FL 32821
US

2. Principal Place of Business
6301 Westwood Blvd
Suite, Apt. #, etc.

3. Mailing Address
770 1 UNIVERSAL BLVD
Suite, Apt. #, etc.

City & State
ORLANDO

City & State
ORLANDO

Zip
32819

Country

Zip
32819

Country
U.S.A

4. FEI Number 59-3409256

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

PATEL, ARVIND
10849 WOODCHASE CIRCLE
ORLANDO FL 32836

Name
PATEL ARVIND

Street Address (P.O. Box Number is Not Acceptable)
770 1 UNIVERSAL BLVD

City ORLANDO FL Zip Code 32819

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 Arvind Patel (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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D
NAME PATEL, ARVIND
STREET ADDRESS 4872 CYPRESS WOODS DR NUMBER 321
CITY-ST-ZIP ORLANDO FL 32811 ☐ Delete

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

TITLE VP
NAME PATEL, JAY R
STREET ADDRESS 4515 VILLAGE WOOD DR
CITY-ST-ZIP ORLANDO FL ☐ Delete

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

TITLE VP
NAME PATEL, KIRAN
STREET ADDRESS 6700 NW 77 CT
CITY-ST-ZIP MIAMI FL ☐ Delete

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

TITLE VP
NAME PATEL, DEPAK
STREET ADDRESS 4872 CYPRESS WOODS DR., #321
CITY-ST-ZIP ORLANDO FL ☐ Delete

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

TITLE VP
NAME PATEL, ANIL
STREET ADDRESS 4872 CYPRESS WOODS DR., #321
CITY-ST-ZIP ORLANDO FL ☐ Delete

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

TITLE VP
NAME PATEL, VIJAY
STREET ADDRESS 4872 CYPRESS WOODS DR., #321
CITY-ST-ZIP ORLANDO FL ☐ Delete

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

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: Arvind Patel
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/21/01 407 3134200
Date Daytime Phone #

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90382 008 ***150.00

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DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)