

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000005382

1. Entity Name
STONEBRIDGE LANDINGS II DEVELOPMENT, INC.

FILED
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90242 047 ***150.00

Principal Place of Business
**701 BRICKELL AVENUE, SUITE 1400
SUITE 1400
MIAMI FL 33131-2822**

Mailing Address
**701 BRICKELL AVENUE, SUITE 1400
SUITE 1400
MIAMI FL 33131-2822**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0795201**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

**STOSIK, VICTOR L
701 BRICKELL AVENUE
SUITE 1400
MIAMI FL 33131-2822**

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, 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-
NAME
STREET ADDRESS
CITY-ST-ZIP
**P/D
PITTS, W. DOUGLAS
701 BRICKELL AVENUE, SUITE 1400
MIAMI FL 33131-2822** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**EVP
VASSILAROS, ELIAS
701 Brickell Avenue, Suite 1400
Miami, Florida 33131-2822** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V/D
COURTELIS, PAN
701 BRICKELL AVENUE, SUITE 1400
MIAMI FL 33131-2822** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**V
VASSILAROS, ELIAS
701 BRICKELL AVENUE, SUITE 1400
MIAMI FL 33131-2822** ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
KURPS, JAMES
701 BRICKELL AVENUE, SUITE 1400
MIAMI FL 33131-2822** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
PRIDGEN, DOUGLAS
701 BRICKELL AVENUE, SUITE 1400
MIAMI FL 33131-2822** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
MCNEEL, VAN L
5401 W KENNEDY BLVD
TAMPA FL 33069** ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/4/01

305-379-8467

CR2E034 (10/00)