

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90077 023 ***158.75

DOCUMENT # P97000007157

1. Entity Name
ROTONDA WEST, INC.



Principal Place of Business
**615 CRESCENT EXECUTIVE CT
STE 120
LAK MARY FL 32746
US**

Mailing Address
**615 CRESCENT EXECUTIVE CT
STE 120
LAK MARY FL 32746
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3459034**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**GRAY, DWAYNE JR
135 WEST CENTRAL BLVD
SUITE 1100
ORLANDO FL 32801**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
WOLF, JONATHAN
615 CRESCENT EXECUTIVE CT, STE 120
LAKE MARY FL 32746** ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BORCK, TODD L
615 CRESCENT EXECUTIVE CT, STE 120
LAKE MARY FL 32746** ☐ Delete

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

TITLE
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CITY-ST-ZIP ☐ Delete

TITLE
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CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Change ☐ Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jonathan L. Wolf

Date

1/8/03

Daytime Phone #

407-333-3233

CR2E034 (10/02)

**Professional
Management
OF CENTRAL FLORIDA, INC.**

Attachment # 80069178
P970000067157

Via U.S. Regular Mail

March 31, 2003

Uniform Business Report
Florida Department of State
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: ROTONDA WEST, INC.

Attention Registration Section:

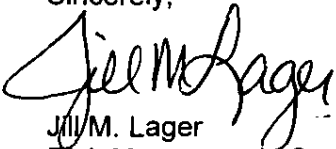
Enclosed please find the 2003 For Profit Corporation Uniform Business Report (UBR) for **Rotonda West, Inc.** and check #1151 in the amount of \$158.75 reflecting the filing fee and \$8.75 for a Certificate of Status.

Therefore, please file and provide the Certificate of Status at your earliest convenience.

Your courtesy and assistance to this matter is greatly appreciated and should you have any questions please call me at 561-868-7088 x107 or Email: jlager@pmcfi.com

Thanks so much.

Sincerely,



Jill M. Lager
Risk Management Coordinator

Enclosure

cc: Karen L. Ahr (via U.S. Regular Mail)