

2000 UNIFORM BUSINESS REPORT (UBR)

AMENDING 2000

DOCUMENT # P97000028040

1. Entity Name
Centerline Homes at Pembroke Shores, Inc.

Principal Place of Business
12534 Wiles Road
Coral Springs, FL 33076

Mailing Address
12534 Wiles Road
Coral Springs, FL 33076

FILED

00 SEP -7 AM 9:28

SECRETARY OF STATE
TALLAHASSEE FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-746177

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

Larry A. Rothenberg, P.A.
900 North Federal Highway, Suite 460
Boca Raton, FL 33432

Name
Kipnis Tescher Lippman & Valinsky, P.A.
Street Address (P.O. Box Number is Not Acceptable)
100 N.E. Third Avenue
Suite 610
City
Fort Lauderdale FL Zip Code
33301

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

Howard A. Tescher, President

8/27/00

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

(NOTE: Registered Agent signature required when reinstating)

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
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DIRECTOR
CRAIG PERRY
12534 WILES RD.
CORAL SPRINGS, FL 33076

TITLE
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Director
Stephen Margolis
12534 Wiles Road
Coral Springs, FL 33076

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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:

Craig Perry, President 8/26/00 344-8040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)