

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90204 007 ***158.75

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DOCUMENT # P97000039725

1. Entity Name

LAND DESIGN SOUTH OF FLORIDA, INC.



Principal Place of Business
**2101 CENTREPARK WEST DRIVE
SUITE 100
WEST PALM BEACH FL 33409
US**

Mailing Address
**2101 CENTREPARK WEST DRIVE
SUITE 100
WEST PALM BEACH FL 33409
US**

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

65-0759555

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

☒ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MENDOZA, MARIO D III
251 ROYAL PALM WAY
STE 602
PALM BEACH FL 33480**

Name
Mario G. de Mendoza, III, P.A.

Street Address (P.O. Box Number is Not Acceptable)
12765 Forest Hill Boulevard, Suite 1302

City
Wellington

FL

Zip Code
33414

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

Mario G. de Mendoza, III, President

04/21/03

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
ST
BENTZ, ROBERT A ☐ Delete
STREET ADDRESS
1280 N CONGRESS AVENUE, SUITE 215
CITY-ST-ZIP
WEST PALM BEACH FL 33409

TITLE
NAME
ST ☒ Change ☐ Addition
Bentz, Robert A.
STREET ADDRESS
2101 Centrepark West Drive, #100
CITY-ST-ZIP
West Palm Beach FL 33409

TITLE
NAME
PD
BENTZ, KAREN F ☐ Delete
STREET ADDRESS
1280 N CONGRESS AVENUE, SUITE 215
CITY-ST-ZIP
WEST PALM BEACH FL 33409

TITLE
NAME
PD ☒ Change ☐ Addition
Bentz, Karen F
STREET ADDRESS
2101 Centrepark West Drive, #100
CITY-ST-ZIP
West Palm Beach, FL 33409

TITLE
NAME
VP
LELONEK, JOSEPH ☐ Delete
STREET ADDRESS
1280 N CONGRESS AVENUE, SUITE 215
CITY-ST-ZIP
WEST PALM BEACH FL 33409

TITLE
NAME
VP ☒ Change ☐ Addition
Lelonek, Joseph
STREET ADDRESS
2101 Centrepark West Drive, #100
CITY-ST-ZIP
West Palm Beach FL 33409

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
☐ Delete
STREET ADDRESS
CITY-ST-ZIP

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

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

2/10/03 478-8501

Date

Daytime Phone #

CR2E034 (10/02)