

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 27, 1999 8:00 am
Secretary of State

04-27-1999 90205 012 ***150.00

DOCUMENT # P97000046639

1. Corporation Name

BPL MAITLAND CONCOURSE, INC.

Principal Place of Business

**1300 N SEMORAN BLVD
SUITE 100
ORLANDO FL 32807**

Mailing Address

**P. O. BOX 574738
ORLANDO FL 32857-4738
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/27/1997

4. FEI Number

59-3450321

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 100 Lincoln Ave.

2a. Mailing Address

26 P. O. Box 3010

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 Winter Park, Fl.

City & State

28 Winter Park, Fl.

Zip

Country

Zip

Country

24 32789 25 Orange

29 3010

30 Orange

9. Name and Address of Current Registered Agent

**BATTAGLIA, W. P.
1300 N SEMORAN BLVD
SUITE 100
ORLANDO FL 32807**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

100 Lincoln Ave.

83

84 City

Winter Park

FL

85 Zip Code

32789

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE **D**
NAME **BATTAGLIA, R. E.**
STREET ADDRESS **1300 N SEMORAN BLVD SUITE 100**
CITY-STATE-ZIP **ORLANDO FL 32807**

TITLE **D**
NAME **BATTAGLIA, W. P.**
STREET ADDRESS **222 W COMSTOCK AVE SUITE 101**
CITY-STATE-ZIP **WINTER PARK FL 32789**

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

**100 Lincoln Ave.
Winter Park, Fl. 32789**

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

**100 Lincoln Ave.
Winter Park, Fl. 32789**

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

R. E. Battaglia
R. E. Battaglia, Director

April 24, 1999

407-622-1500

Date

Daytime Phone #

CR2E034 (11/98)