

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 24, 2001 8:00 am
Secretary of State
 04-24-2001 90346 002 ***150.00

DOCUMENT # P97000099692

1. Entity Name

WELCOME HOMES PROPERTY INVESTMENTS INC.

Principal Place of Business

3146 VINELAND RD
 SR 535
 KISSIMMEE FL 34746

Mailing Address

3146 VINELAND RD
 SR 535
 KISSIMMEE FL 34746

2. Principal Place of Business

3. Mailing Address

200 E. ROBINSON STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 500

City & State

City & State

ORLANDO, FLORIDA

Zip

Country

Zip

Country

32801

USA

4. FEI Number

59-3481867

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

MCCORMACK, ANNE-MARIE
3146 VINELAND RD
SR 535
KISSIMMEE FL 34746

Name

FLORIDA CORPORATE SUPPORT, INC.

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

200 E. ROBINSON STREET

Suite 500

City

ORLANDO

FL

Zip Code

32801

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 **D** ☐ Delete
 NAME **MCCORMACK, ANNE-MARIE**
 STREET ADDRESS **3146 VINELAND RD, SR 535**
 CITY-ST-ZIP **KISSIMMEE FL 34746**

TITLE **D/P** ☐ Change ☒ Addition
 NAME **McCormack Jon**
 STREET ADDRESS **3146 Vineland Rd SR 535**
 CITY-ST-ZIP **Kissimmee Fl. 34746**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

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

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 #

3/10/2001 407-390-9000

CR2E034 (10/00)