

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000102170

1. Entity Name

MAGNOLIA POINTE, INC.

FILED

00 MAR 10 PM 4:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

3200 SOUTH HIAWASSEE ROAD, S TE 206
ORLANDO FL 32835

P.O. BOX 4961
ORLANDO FL 32802-4961

2. Principal Place of Business

800 N. HIGHLAND AVE.

3. Mailing Address

Suite, Apt. #, etc.

SUITE 200

Suite, Apt. #, etc.

City & State

ORLANDO, FL

City & State

Zip

32803

Country

USA

Zip

Country

4. FEI Number

59-3491105

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FLORIDA
390 N. ORANGE AVE.
SUITE 1100
ORLANDO FL 32801

7. Name and Address of New Registered Agent

Name

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

300003204403--2

-04/11/00--01118--012

City

****150.FL

****150.00

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, 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

TITLE VP ☐ Delete

NAME TUTTLE, MILLS L
STREET ADDRESS 3200 SOUTH HIAWASSEE ROAD., S TE 206
CITY-ST-ZIP ORLANDO FL 32835

TITLE VPAS ☐ Delete

NAME MCKINNEY, EUGENE J
STREET ADDRESS 3200 SOUTH HIAWASSEE ROAD., S TE 206
CITY-ST-ZIP ORLANDO FL 32835

TITLE VPAT ☐ Delete

NAME LAWLER, THOMAS P
STREET ADDRESS 3200 SOUTH HIAWASSEE ROAD., S TE 206
CITY-ST-ZIP ORLANDO FL 32835

TITLE VPT ☐ Delete

NAME WILLNER, DAVID M
STREET ADDRESS 3200 SOUTH HIAWASSEE ROAD., S TE 206
CITY-ST-ZIP ORLANDO FL 32835

TITLE VPC ☐ Delete

NAME PEISNER, ERIC
STREET ADDRESS 3300 SOUTH HIAWASSEE ROAD., STE 107
CITY-ST-ZIP ORLANDO FL 32835

TITLE ☐ Delete

NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 800 N. HIGHLAND AVE., SUITE 200
CITY-ST-ZIP ORLANDO, FL 32803

TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 800 N. HIGHLAND AVE., SUITE 200
CITY-ST-ZIP ORLANDO, FL 32803

TITLE ☒ Change ☐ Addition

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TITLE ☒ Change ☐ Addition

NAME
STREET ADDRESS 800 N. HIGHLAND AVE., SUITE 200
CITY-ST-ZIP ORLANDO, FL 32803

TITLE ☐ Change ☒ Addition

NAME KROPP, STEVEN G.
STREET ADDRESS 800 N. HIGHLAND AVE., SUITE 200
CITY-ST-ZIP ORLANDO, FL 32803

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

STEVEN G. KROPP, PRESIDENT

Date

Daytime Phone #

3-1-00

407/297-1000

CR2E034 (9/99)