

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000104066

1. Entity Name

ATLANTIC PREFERRED HOLDING COMPANY



FILED

May 01, 2001 8:00 am
Secretary of State

05-01-2001 90069 001 ***150.00

Principal Place of Business

201 EAST PINE ST.
STE. 600
ORLANDO FL 32801-2719
US

Mailing Address

201 EAST PINE ST.
STE. 600
ORLANDO FL 32801-2719
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 59-3498539

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

ALLEN, THOMAS R
105 E. ROBINSON STREET
SUITE 201
ORLANDO FL 32801

Name

Richard T. Grelecki

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

201 E. Pine Street Suite 600

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
NAME
STREET ADDRESS
CITY-ST-ZIP
CD
HOPKINS, ROBERTA J
1230 PARK POINT LANE
WINTER PARK FL 32789 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DP
Richard T. Grelecki
201 E. Pine St. #600
Orlando, FL 32801 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
KEEFE, LOIS R
1555 WATERWATCH DRIVE
ORLANDO FL 32806 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Lois Keefe
201 E. Pine St. #600 Orlando, FL 32801 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
KNIGHT, JON M
2420 ORCHARD DRIVE
ORLANDO FL 32806 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVT
Carol Gonzales
201 E. Pine Street #600
Orlando, FL 32801 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HUGGINS, J.A.
1057 MAITLAND CENTER COMMONS SUITE 100
MAITLAND FL 32751 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
Thomas James
201 E. Pine St. #600
Orlando, FL 32801 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SEALL, JOHN
1209 AUSTIN ROAD
ORLANDO FL 32806 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
Rebecca Click
201 E. Pine St. #600
Orlando, FL 32801 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

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

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

04/19/01 407-514-2486

Date

Daytime Phone #

CR2E034 (10/00)