

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90140 026 ***150.00

DOCUMENT # P98000022546

1. Entity Name
TCC BONITA SPRINGS INC.

Principal Place of Business
1180 SPRING CENTRE S. BLVD.
#211
ALTAMONTE SPRINGS FL 32714

Mailing Address
1180 SPRING CENTRE S. BLVD.
#211
ALTAMONTE SPRINGS FL 32714

953975



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
300 INTERNATIONAL PKWY.

3. Mailing Address
300 INTERNATIONAL PKWY.

Suite, Apt. #, etc.
SUITE 184

Suite, Apt. #, etc.
SUITE 184

City & State
HEATHROW FL

City & State
HEATHROW FL

Zip
32746

Country
USA

Zip
32746

Country
USA

4. FEI Number 59-3506303

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LUBINSKY, TERRY
1180 SPRING CENTRE S. BLVD.
#211
ALTAMONTE SPRINGS FL 32714

7. Name and Address of New Registered Agent

Name LUBINSKY, TERRY
Street Address (P.O. Box Number is Not Acceptable)
300 INTERNATIONAL PKWY.
SUITE 184
City HEATHROW FL Zip Code 32746

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

(NOTE: Registered Agent signature required when reinstating)

4-16-01

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

TITLE P
NAME LUBINSKY, TERRY
STREET ADDRESS 1180 SPRING CENTRE S. BLVD. #211
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714 ☐ Delete

TITLE VP
NAME CANNON, FRANK J
STREET ADDRESS 1180 SPRING CENTRE S. BLVD. #211
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE LUBINSKY, TERRY ☒ Change ☐ Addition
NAME
STREET ADDRESS 300 INTERNATIONAL PKWY. -#184
CITY-ST-ZIP HEATHROW FL 32746

TITLE CANNON, FRANK J. ☒ Change ☐ Addition
NAME
STREET ADDRESS 300 INTERNATIONAL PKWY. -#184
CITY-ST-ZIP HEATHROW FL 32746

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

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

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

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: *Terry Lubinsky*
Signature, typed or printed name of signing officer or director

4-16-01

Date

407 804 8949

Daytime Phone #

CR2E034 (10/00)