

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2000 8:00 am
Secretary of State

03-21-2000 90053 010 ***150.00

DOCUMENT # P98000022835

1. Entity Name

JDG PROPERTIES, INC.

Principal Place of Business

**5190 WEST ATLANTIC AVENUE
 DELRAY BEACH FL 33484**

Mailing Address

**5190 WEST ATLANTIC AVENUE
 DELRAY BEACH FL 33484-8131**

2. Principal Place of Business

127 BAREFOOT COVE

Suite, Apt. #, etc.

3. Mailing Address

127 BAREFOOT COVE

Suite, Apt. #, etc.

City & State

HYPOLEXO, FL

City & State

HYPOLEXO, FL

Zip

33462

Country

USA

Zip

33462

Country

USA

4. FEI Number

65-0825299

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

**PARK, MICHAEL G ESQ
 STROOCK & STROOCK & LAVAN LLP
 200 S. BISCAYNE BLVD., STE. 3300
 MIAMI FL 33131-2385**

7. Name and Address of New Registered Agent

Name

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

127 BAREFOOT COVE

City

HYPOLEXO

FL

Zip Code

33462

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

2-3-00

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so. ☐

**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 ☐ Delete

**P
 GOLDSTEIN, JON D
 5961 NW 2ND AVE. #202
 BOCA RATON FL 33487**

TITLE ☒ Delete

**VP Sheri
 GOLDSTEIN, GENE
 127 BAREFOOT COVE
 HYPOLEXO FL 33410**

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete

NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition

**D/P/T
 127 BAREFOOT COVE
 HYPOLEXO, FL 33462**

TITLE ☐ Change ☒ Addition

**D/VP/S
 PARK, MICHAEL G.
 127 BAREFOOT COVE
 HYPOLEXO, FL 33462**

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

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: **X**

SHERI GOLDSTEIN
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2-3-00 561-582-4434

CR20-034 (9/99)