

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000037401

1. Entity Name

CELEBRATION WORLD RESORT DEVELOPMENT, INC.

FILED
Mar 01, 2000 8:00 am
Secretary of State

03-01-2000 90028 028 ***150.00

Principal Place of Business

Mailing Address

~~7380 SAND LAKE ROAD, SUITE 560-C~~
~~ORLANDO FL 32818~~

~~7380 SAND LAKE ROAD, SUITE 560-C~~
~~ORLANDO FL 32818-5248~~

C0027573



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7503 Atlantis Way

Suite, Apt. #, etc.

3. Mailing Address

7503 Atlantis Way

Suite, Apt. #, etc.

City & State

Kissimmee, Florida

City & State

Kissimmee, Florida

Zip

34747

Country

USA

Zip

34747

Country

USA

4. FEI Number

59-3507735

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

DYMOND, WILLIAM T JR
215 N. EOLA DRIVE
ORLANDO FL 32801

Name

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

City

FL

Zip Code

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

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☐ Delete
NAME **DAH RUJ, JOSE JR**
STREET ADDRESS **7380 SAND LAKE ROAD, SUITE 560-C**
CITY-ST-ZIP **ORLANDO FL 32819**

☒ Change ☐ Addition
TITLE **7503 Atlantis Way**
NAME **Kissimmee, Florida 34747**
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
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☐ Change ☐ Addition
TITLE
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 OF JOSE DAH RUJ, JR.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2/1/00

Daytime Phone #

407-234-6065

CR2E034 (9/99)