

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 26, 2001 8:00 am
Secretary of State
 04-26-2001 90286 020 ***150.00

DOCUMENT # P98000048170

1. Entity Name

VISTA PROPERTIES RENTALS AND SALES, INC.

Principal Place of Business

**100 VISTA ROYALE BOULEVARD
 VERO BEACH FL 32962**

Mailing Address

**100 VISTA ROYALE BOULEVARD
 VERO BEACH FL 32962**

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 **65-0838523**

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

**REID, PHILIP H JR.
 6606 20TH STREET
 VERO BEACH FL 32966**

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's 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-STATE-ZIP	D EWING, RONALD E 100 VISTA ROYALE BOULEVARD VERO BEACH FL 32962	☒ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	D GASKILL, ROBERT L 100 VISTA ROYALE BOULEVARD VERO BEACH FL 32962	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	P KURTZ, JOHN C 100 VISTA ROYALE BOULEVARD VERO BEACH FL 32962	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DD KOEHLER, KIRK W 100 VISTA ROYALE BLVD. VERO BEACH FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PTD	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-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 my address, with another like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John C. Kurtz 4/27/01 (561)562-9031

Date

Daytime Phone

CR2E034 (10/00)