

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90099 034 ***150.00

DOCUMENT # P98000060733

1. Entity Name

IH LAND DEVELOPMENT COMPANY, INC.

Principal Place of Business

Mailing Address

**JR MANOR DRIVE
 SUITE 100
 TAMPA FL 33634**

**8401 JR MANOR DRIVE
 SUITE 100
 TAMPA FL 33634-1400**

00010001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3529015

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**LYNCH, PAUL
 SHUMAKER LOOP KENDRICK
 101 E KENNEDY BLVD #2800
 TAMPA FL 33602**

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 **PST** ☐ Delete
 NAME **SUAREZ, JACK D**
 STREET ADDRESS **8401 JR MANOR DRIVE, SUITE 100**
 CITY-ST-ZIP **TAMPA FL 33634**

TITLE **D.P.S** ☒ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** ☒ Delete
 NAME **PRINCE, RANDELL L**
 STREET ADDRESS **8401 JR MANOR DRIVE, SUITE 100**
 CITY-ST-ZIP **TAMPA FL 33634**

TITLE **T.S** ☐ Change ☒ Addition
 NAME **Erin Ten Broek**
 STREET ADDRESS **8401 JR Manar Dr, Ste 100**
 CITY-ST-ZIP **Tpa, Fl 33634**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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

TITLE ☐ Delete
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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:

Erin Ten Broek
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-18-2000

Date

813-886-2433

Daytime Phone #

CR2E034 (9/99)