

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 17, 2003 8:00 am
Secretary of State

02-17-2003 90229 040 ***150.00

DOCUMENT # **P98000069462**

1. Entity Name
WORLD PLAZA II MANAGEMENT GROUP, INC.



Principal Place of Business **12651**
~~12500~~ **WORLD PLAZA LANE**
~~SUITE 1~~
FORT MYERS FL 33907

Mailing Address **12651**
12500 WORLD PLAZA LANE
~~SUITE 1~~
FORT MYERS FL 33907



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business
12651 World Plaza Lane
Suite, Apt. #, etc.

3. Mailing Address
12651 World Plaza Lane
Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0855350** 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

HAUGEN, HERMAN
~~12500~~ **WORLD PLAZA LANE** **12651**
~~SUITE 1~~
FORT MYERS FL 33907

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* DATE **2/14/03**

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<i>[Signature]</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSON, CORDELL Q		NAME	<i>Herman Haugen</i>	
STREET ADDRESS	12500 WORLD PLAZA LANE, SUITE 1		STREET ADDRESS	12651 World Plaza Lane	
CITY-ST-ZIP	FORT MYERS FL 33907		CITY-ST-ZIP	Fort Myers FL 33907	
TITLE	D	<input type="checkbox"/> Delete	TITLE	<i>Haugen</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAUGEN, HERMAN		NAME	<i>Same</i>	
STREET ADDRESS	12500 WORLD PLAZA LANE, SUITE 1		STREET ADDRESS	<i>Same</i>	
CITY-ST-ZIP	FORT MYERS FL 33907		CITY-ST-ZIP	<i>Same</i>	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	<i>James T. Petersen</i>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETERSEN, JAMES T		NAME	<i>Same</i>	
STREET ADDRESS	12500 WORLD PLAZA LANE, SUITE 1		STREET ADDRESS	<i>Same</i>	
CITY-ST-ZIP	FORT MYERS FL 33907		CITY-ST-ZIP	<i>Same</i>	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

12. 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **HERMAN HAUGEN** **2/14/03** **239-275-5330**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (10/02)