

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90077 016 ***150.00

DOCUMENT # P98000083623

1. Entity Name

~~BROADMOOR SENIOR HOUSING MANAGEMENT OF WHITE CIT~~
SEWALLS POINT REAL ESTATE GROUP, INC

Principal Place of Business

Mailing Address

~~THE RIGEL'S COVE WAY~~
~~BEACH FL 34957~~

4237 RIGEL'S COVE WAY
 JENSEN BEACH FL 34957-4385

LUU33100



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 **59-3543039**

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

Name

DANIEL J. LUNDSTROM

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

4237 RIGEL'S COVE WAY

JENSEN BEACH, FL 34957

City **JENSEN BEACH**

FL

Zip Code

34957

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]*
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

3/3/00
 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

☐ Delete
D
LUNDSTROM, DANIEL J
4237 RIGEL'S COVE WAY
JENSEN BEACH FL 34957

☐ Change ☒ Addition
PVT SD
 TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

☒ Delete
D
LUNDSTROM, KATHRYN M
4237 RIGEL'S COVE WAY
JENSEN BEACH FL 34957

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

☒ Delete
D
LUNDSTROM, CHRISTOPHER M
4237 RIGEL'S COVE WAY
JENSEN BEACH FL 34957

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

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 CITY-ST-ZIP

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]*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/3/00 **54-229-7977**
 Date Daytime Phone #

CR2E034 (9/99)