

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000095536

1. Entity Name

LENMAR MANAGEMENT, INC.

FILED
May 08, 2000 8:00 am
Secretary of State

05-08-2000 90020 020 ***150.00

Principal Place of Business

Mailing Address

14250 COLONIAL GRAND BLVD., #2916
ORLANDO FL 32837

14250 COLONIAL GRAND BLVD., #2916
ORLANDO FL 32837-4864

2. Principal Place of Business

772 FOREST LANE

3. Mailing Address

423 KNIGHT LAND CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

KISSIMMEE FLORIDA

City & State

ORLANDO FLORIDA

4. FEI Number

59-3546251

Applied For

Not Applicable

Zip

34746

Country

USA

Zip

32834

Country

USA

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

IVANS, ANNE J
5260 W. HWY. 192
KISSIMMEE FL 34746

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 PD
NAME IVANS, ANNE J
STREET ADDRESS 14250 COLONIAL GRAND BLVD., #2916
CITY-ST-ZIP ORLANDO FL 32837 ☐ Delete

TITLE PRESIDENT
NAME IVANS ANNE J
STREET ADDRESS 423 KNIGHT LAND COURT
CITY-ST-ZIP ORLANDO FL 32834 ☒ Change ☐ Addition

TITLE VD
NAME IVANS, ROBERT J
STREET ADDRESS 14250 COLONIAL GRAND BLVD., #2916
CITY-ST-ZIP ORLANDO FL 32837 ☐ Delete

TITLE VICE PRESIDENT
NAME IVANS ROBERT J
STREET ADDRESS 772 FOREST LANE
CITY-ST-ZIP KISSIMMEE FL 34746 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
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STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/00

Date

407 460 2879

Daytime Phone #