

2001 UNIFORM BUSINESS REPORT (UBR)

0281161

DOCUMENT # P98000101453

1. Entity Name

WHITE OAK CAPE CORAL, INC.

FILED

01 APR 19 PM 12:37

Principal Place of Business

322 BANYAN BLVD.
WEST PALM BEACH FL 33401

Mailing Address

322 BANYAN BLVD.
WEST PALM BEACH FL 33401

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

P.O. BOX 4961

Suite, Apt. #, etc.

ORLANDO, FL

Zip 32802

Country USA

4. FEI Number 65-0882187

Applied For

Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RYAN, PAULA J
322 BANYAN BLVD.
WEST PALM BEACH FL 33401

7. Name and Address of New Registered Agent

Name B+C CORPORATE SERVICES OF CENTRAL FLORIDA, INC.
Street Address (P.O. Box Number is Not Acceptable) 310 N. ORANGE AVENUE
Suite 1100
City ORLANDO State FL Zip Code 32801

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.

B+C CORPORATE SERVICES OF CENTRAL FLORIDA, INC.

SIGNATURE

[Signature]
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/27/01

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

TITLE D
NAME RYAN, PAULA J
STREET ADDRESS 322 BANYAN BLVD.
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

TITLE VP
NAME PINGITORE, ROY
STREET ADDRESS 322 BANYAN BLVD.
CITY-ST-ZIP WEST PALM BEACH FL 33401 ☐ Delete

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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CITY-ST-ZIP

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:

[Signature] ROY A. PINGITORE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/08/01

Date

561-838-8886

Daytime Phone #

CR2E034 (10/00)