

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90151 006 ***150.00

DOCUMENT # P99000000900 ✓

1. Entity Name

Pine Hills Athletic Club, Inc.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1100 North Pine Hills
Suite, Apt. #, etc.

3. Mailing Address

1113 North Pine Hills Rd
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Orlando Florida

City & State

Orlando Florida

4. FEI Number

59-3549344

Applied For

Not Applicable

Zip

32808

Country

USA

Zip

32808

Country

USA

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

7. Name and Address of Current Registered Agent

Name

Bowerbank Income Tax

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

Accounting Services, Inc

1113 North Pine Hills Road

Orlando

FL

Zip Code

32808

**DO NOT WRITE
IN THIS SPACE**

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 resigning)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
(See criteria on back)

☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

P.T.D.
TITLE: Ashley-Jones, Barbara
NAME: 1113 North Pine Hills Rd
STREET ADDRESS: Orlando Florida 32808-7125
CITY - ST - ZIP:
TITLE: VPD
NAME: Polue, Lesline
STREET ADDRESS: 1113 North Pine Hills Rd
CITY - ST - ZIP: Orlando Florida 32808-7125

TITLE:
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

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TITLE:
NAME:
STREET ADDRESS:
CITY - ST - ZIP:

**DO NOT WRITE
IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

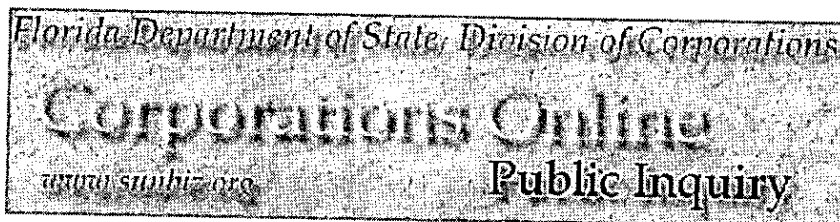
4/25/02

Date

407-523-0500

Daytime Phone #

CR2E034B (12/01)



Florida Profit
Attachment
PINE HILLS ATHLETIC CLUB, INC.

P99000000900
6054495

PRINCIPAL ADDRESS
1100 NORTH PINE HILLS ROAD
ORLANDO FL 32808-7125

MAILING ADDRESS
1100 NORTH PINE HILLS ROAD
ORLANDO FL 32808-7125

Document Number
P99000000900

FEI Number
593549344

Date Filed
01/04/1999

State
FL

Status
ACTIVE

Effective Date
NONE

Registered Agent

Name & Address
BOWERBANK INCOME TAX & ACCOUNTING SERVICE 1113 NORTH PINE HILLS ROAD ORLANDO FL 32808-7125

Officer/Director Detail

Name & Address	Title
ASHLEY-JONES, BARBARA 1113 NORTH PINE HILLS ROAD ORLANDO FL 32808-7125	PTD
POWE, LESLINE 1113 NORTH PINE HILLS ROAD ORLANDO FL 32808-7125	VPD

Annual Reports

Report Year	Filed Date	Intangible Tax
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