

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000004895

1. Entity Name

URAL OF ORLANDO, INC.

FILED
Apr 24, 2000 8:00 am
Secretary of State

04-24-2000 90016 018 ***150.00

Principal Place of Business

301 S. ORLANDO AVE., STE. 200
MAITLAND FL 32751

Mailing Address

301 S. ORLANDO AVE., STE. 200
MAITLAND FL 32751-5651

2. Principal Place of Business

3. Mailing Address

P.O. BOX 1720

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

WINTER PARK, FL

4. FEI Number

59-3555625

Applied For

Not Applicable

Zip

Country

Zip

Country

32790-1720

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

PRICE, PAMELA O
201 E. PINE ST., STE. 1200
ORLANDO FL 32801

Name
RICHARD M. ROBINSON

Street Address (P.O. Box Number is Not Acceptable)
201 E. PINE STREET, SUITE 1200

ORLANDO,

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.

SIGNATURE

Richard M. Robinson

Richard M. Robinson

4/6/00

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
NAME
STREET ADDRESS
CITY-ST-ZIP
DPS
HOLLER, ROGER W JR
301 S. ORLANDO AVE., STE. 200
MAITLAND FL 32751 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
HOLLER, ROGER W III
301 S. ORLANDO AVE., STE. 200
MAITLAND FL 32751 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DV
HOLLER, CHRISTOPHER A
301 S. ORLANDO AVE., STE. 200
MAITLAND FL 32751 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVT
ROGERS HOLLER, JULIETTE E
301 S. ORLANDO AVE., STE. 200
MAITLAND FL 32751 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
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:

Richard M. Robinson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.12.00

Date

Daytime Phone #

CR2E034 (9/99)