

2000 UNIFORM BUSINESS REPORT (UBR)**FILED****Mar 02, 2000 08:00 AM**
Secretary of State**DOCUMENT # P99000058493****1. Entity Name**
ESI MONTGOMERY COUNTY GP, INC.**Principal Place of Business**

700 UNIVERSE BLVD

JUNO BEACH
33408

FL

Mailing Address

700 UNIVERSE BLVD

JUNO BEACH
33408

FL

2. Principal Place of Business**3. Mailing Address**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number**65-0943208**

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 AgentLEON J E
9250 W FLAGLER STMIAMI
33174 US

FL

7. Name and Address of New Registered Agent

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)

03/02/2000

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**TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

D ATKINSON KAREN

700 UNIVERSE BLVD

JUNO BEACH FL 33408

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11TITLE AS ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE AS ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE S ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE DT ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE DVP ☐ Change ☒ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE DP ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

YACKIRA MICHAEL W

700 UNIVERSE BLVD

JUNO BEACH FL 33408

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** RITA W. COSTANTINO

AS 03/02/2000