## FILED 2000 UNIFORM BUSINESS REPORT (UBR) May 23, 2000 8:00 am Secretary of State DOCUMENT # **P99000066764** WINDERMERE PROPERTIES AND ENGINEERING SERVICES, 05-23-2000 90234 042 \*\*\*150.00 Mailing Address Principal Place of Business 9780 WILD OAK DRIVE ---- WILD OAK DRIVE WINDERMERE FL 34786-8337 🏋 FL 34786-8337 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Kosa MCFEELY, ROSALINA T 12738 WOODBURY OAKS DRIVE ORLANDO FL 32828 8. The above-ramed entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. PTD ☐ Change Addition ☐ Delete TITLE TITLE ROTHROCK, JAMES E NAME 9780 WILD OAK DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WINDERMERE FL 34786-8337 CITY-ST-ZIP Addition ☐ Delete TITLE TITLE Rothrock, RosalmaT. MCFEELY, ROSALINA T NAME NAME 9780 Wild Oak Drive STREET ADDRESS 12738 WOODBURY OAKS DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32828 ☐ Change \_ \_ ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-ZIP CITY-ST-2IP ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete ☐ Change TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rothrock

30 April 2000

407/293-10