407/425-6559 Daytime Phone #

1/27/00

2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

DOCUMENT # P9900070007 1. Entity Name BRECKENRIDGE COMMONS, INC.							'n		
						FILED			
						OO JAN 27 PM 3: 2!			
Principal Place	e of Business	Mailing Address							
615 CRESCENT EXECUTIVE COURT. STE. 120 LAKE MARY FL 32746		615 CRESCENT EXECUTIVE COURT. STE. 120 LAKE MARY FL 32748-2120			SECRETARY (TALLAHASSEE	, FLORID	A		
Principal Place of Business Mailing Address									
								} 	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WR	ITE IN THIS S	PACE		
City & State		City & State		II	I. FEI Number 59–3594368	-	\longrightarrow	plied For ot Applicable	
Zip	Country	Zip	Coun	try		5. Certificate of Status Desired		88.75 Add	
	6. Name and Address of Curren	t Registered Agent	.l	I	7	. Name and Address of New			
GRAY, N. DWAYNE JR. GREENSPOON, MARDER, HIRSCHFELD ET AL 135 W. CENTRAL BLVD., STE. 1100				Name			-		
				Street Address (P.O. Box Number is Not Acceptable)					
	ANDO FL 32801		-		FL Zip Code				
The above named entity submits this statement for the purpose of changing its registered								<u> </u>	
SIGNATURE .	Signature, typed or printed name of registered age				ire required whe	en reinstating) 10. Election Campaign F	DATE		0 May Be
Tax filing requirement and elects to do so. (See criteria on back) After MAY 1, 2000 Fee Make Check Payable to D						Trust Fund Contributi			to Fees
11.	OFFICERS AN	D DIRECTORS	12.			ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	S IN 11
TITLE	D	☐ Delete	TITL		V P			☐ Change	XX Addition
NAME STREET ADDRESS CITY-ST-ZIP	613 CRESCENT EXECUTIVE COURT, STE. 120			EET ADDRESS -ST-ZIP	135	wayne Gray, Jr. West Central Bou ndo, FL 32801	levard,	Suite	1100
TITLE	D	☐ Delete	TITL					☐ Change	☐ Addition
NAME STREET ADDRESS CITY-ST-ZIP	615 CRESCENT EXECUTIVE COURT, STE. 120			EET ADDRESS -ST-ZIP					
TITLE		Delete	TITL					Change	Addition
NAME STREET ADDRESS			NAM	eet address			31110 01700(ነታ በመ መደነ	-1119
CITY-ST-ZIP				-ST-ZIP		000003 -02/ ***	£158.75	****	58.75
TITLE		Delete	TITL	E				☐ Change	Addition
NAME			NAM	ie Eet address					
STREET ADDRESS CITY-ST-ZIP		•		-ST-ZIP					
TITLE		Delete	TITL	 E		_	_	☐ Change	☐ Addition
NAME			NAM						
STREET ADDRESS CITY-ST-ZIP			4	EET ADDRESS '-ST-ZIP		₹ 1940 	2 R r		
TITLE	<u> </u>		TITL	~	<u> </u>		+ 1 -3	☐ Change	Addition
NAME	H		NAM		ļ	,			_
STREET ADDRESS				EET ADDRESS '-ST-ZIP			1		
CiTY-ST-ZIP	certify that the information supplied w	ith this filing does not qualify f	or the eve	mntion etai	L ted in Section	on 119 07(3)(i). Florida Statutes	 Lifurther cert	ify that the i	nformation
indicated of the cor	on this report or supplemental report poration or the receiver or trustee em or on an attachment with an address	is true and accurate and that powered to execute this repor	my signa t as requi	tura enall n	SVA THA CON	ne legal effect as it mage linge	r oain: inai i ai	т ап олюег	or onecast 1