

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000075834

1. Entity Name

THE PRESERVE AT INTERLACHEN, INC.

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90871 034 ***158.75

Principal Place of Business

503 INTERLACHEN AVE STE 2
WINTER PARK FL 32789

Mailing Address

503 INTERLACHEN AVE STE 2
WINTER PARK FL 32789-3262

2. Principal Place of Business

P.O. BOX 620

3. Mailing Address

P.O. BOX 620

Suite, Apt. #, etc.

WINTER PARK

Suite, Apt. #, etc.

City & State

FLORIDA

City & State

WINTER PARK, FLORIDA

Zip

32790

Country

U.S.A.

Zip

32790

Country

U.S.A.

4. FEI Number

59-3608446

Applied For

Not Applicable

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

F & L CORP

200 LAURA STREET

JACKSONVILLE FL 32201-0240

Name

ERIC ROSOFF INVEST. PROP. INC.

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

#2

503 N. INTERLACHEN AVENUE

City

WINTER PARK

FL

Zip Code

32789

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

Eric Rosoff / ERIC ROSOFF

3/30/2000

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

Check # 3819 \$158.75

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PRESIDENT
ERIC ROSOFF
503 N. INTERLACHEN AVE. #2
WINTER PARK, FL 32789

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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☐ 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, without other like empowered.

SIGNATURE:

Eric Rosoff / ERIC ROSOFF

3/30/2000 407-647-4949

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)