

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000083612

1. Entity Name

CONVENIENCE DEVELOPMENT CORP.

Principal Place of Business

4505 SOUTH OCEAN BOULEVARD
SUITE 102
HIGHLAND BEACH FL 33487-4227

Mailing Address

4505 SOUTH OCEAN BOULEVARD
SUITE 102
HIGHLAND BEACH FL 33487-4227

2. Principal Place of Business

2909 S. OCEAN BLVD.

3. Mailing Address

2909 S. OCEAN BLVD.

Suite, Apt. #, etc.

SUITE 3-D

Suite, Apt. #, etc.

SUITE 3-D

City & State

HIGHLAND BEACH, FL

City & State

HIGHLAND BEACH, FL

Zip

33487-1819

Country

PALM BEACH

Zip

33487-1819

Country

PALM BEACH

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
343 ALMERIA AVENUE
CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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)

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 \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
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 PSD
NAME SANTICOLA, RONALD P
STREET ADDRESS 4505 SOUTH OCEAN BOULEVARD
CITY-ST-ZIP HIGHLAND BEACH FL 33487-4227

TITLE VTD
NAME SANTICOLA, DARCEE J
STREET ADDRESS 4505 SOUTH OCEAN BOULEVARD
CITY-ST-ZIP HIGHLAND BEACH FL 33487-4227

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSD
NAME SANTICOLA, RONALD P.
STREET ADDRESS 2909 S. OCEAN BLVD, SUITE 3-D
CITY-ST-ZIP HIGHLAND BEACH, FL 33487-1819

TITLE VTD
NAME SANTICOLA, DARCEE J.
STREET ADDRESS 2909 S. OCEAN BLVD, SUITE 3-D
CITY-ST-ZIP HIGHLAND BEACH, FL 33487-1819

TITLE
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TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
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 line empowered.

SIGNATURE:

SANTICOLA, RONALD P. SANTICOLA

Date

Daytime Phone #

FILED
Sep 08, 2000 8:00 am
Secretary of State

09-08-2000 90004 023 ***550.00

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DO NOT WRITE IN THIS SPACE

CR2E034 (5/00)