

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P99000087560

1. Entity Name

ORIGINS REALTY INC.

FILED

00 SEP 25 AM 10:17

SECRETARY OF STATE  
TALLAHASSEE FLORIDA



DO NOT WRITE IN THIS SPACE

Principal Place of Business

3570 WEBBER STREET  
SARASOTA FL 34239

Mailing Address

3570 WEBBER STREET  
SARASOTA FL 34239

2. Principal Place of Business

3570 WEBBER ST

3. Mailing Address

3570 WEBBER ST

Suite, Apt. #, etc.

Suite #201

Suite, Apt. #, etc.

Suite #201

City & State

SARASOTA FL

City & State

SARASOTA FL

Zip

34239 USA

Zip

34239 USA

4. FEI Number

05-0958375

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HILL, BRIAN  
3570 WEBBER STREET  
SARASOTA FL 34239

7. Name and Address of New Registered Agent

Name

HILL, BRIAN

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

3570 WEBBER ST

City

SARASOTA

FL

Zip Code

34239

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

*Brian Hill*  
Signature, typed or printed name of registered agent and title if applicable.

*Brian Hill*  
(NOTE: Registered Agent signature required when re-registering)

9-18-2000

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 \$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 ☐ Delete  
NAME ☐ Delete  
STREET ADDRESS  
CITY-ST-ZIP  
*PRESIDENT, Sec-Treasurer*  
*BRIAN HILL*  
*3712 Greenwald Dr*  
*SARASOTA, FL 34239*

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
*200003415992-9*  
*-10/05/00--01124--017*  
*\*\*\*\*550.00* ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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 like empowered.

SIGNATURE:

*Brian Hill*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

9-18-2000

Date

941-926-1937

Daytime Phone #

CR2E034 (5/00)