

2001 UNIFORM BUSINESS REPORT (UBR)

0062088

DOCUMENT # P99000100529

1. Entity Name

COURTYARD TOWERS, INC.

Principal Place of Business

**800 N. HIGHLAND AVE., STE. 200
ORLANDO FL 32803**

Mailing Address

**POST OFFICE BOX 4961
ORLANDO FL 32802-4691**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

6. Name and Address of Current Registered Agent

**B&C CORPORATE SERVICES OF CENTRAL FLA, INC
390 NORTH ORANGE AVENUE
SUITE 110
ORLANDO FL 32801**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

FILED

01 APR 27 PM 4:45

**SECRETARY OF STATE
TALLAHASSEE FLORIDA**



DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3618381**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

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

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, 2001 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**

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
NAME **KROPP, STEVEN G**
STREET ADDRESS **800 N. HIGHLAND AVE., STE. 200**
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE **VS** ☐ Delete
NAME **CARLTON, CHARLES S**
STREET ADDRESS **800 N. HIGHLAND AVE., STE. 200**
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE **VAS** ☐ Delete
NAME **MCKINNEY, EUGENE J**
STREET ADDRESS **800 N. HIGHLAND AVE., STE. 200**
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE **VAT** ☐ Delete
NAME **LAWLER, THOMAS P**
STREET ADDRESS **800 N. HIGHLAND AVE., STE. 200**
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE **VT** ☐ Delete
NAME **WILLNER, DAVID M**
STREET ADDRESS **800 N. HIGHLAND AVE., STE. 200**
CITY-ST-ZIP **ORLANDO FL 32803**

TITLE **V** ☐ Delete
NAME **TUTTLE, L. MILLS**
STREET ADDRESS **800 N. HIGHLAND AVE., STE. 200**
CITY-ST-ZIP **ORLANDO FL 32803**

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME **000004161530-3**
STREET ADDRESS **-05/08/01--01040--008**
CITY-ST-ZIP ******150.00 ****150.00**

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

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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

STEVEN G. KROPP, PRESIDENT

Date

Daytime Phone #

4-19-01

407-297-1600

CR2E034 (10/00)