

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # VO2148

Entity Name

WARMINSTER PROPERTIES, INC.

Principal Place of Business

Mailing Address

Principal Place of Business

18 NE 15th AVE.

3. Mailing Address

918 NE 15th AVE.

Suite, Apt. #, etc.

UNIT 1

Suite, Apt. #, etc.

UNIT 1

City & State

FT. LAUDERDALE, FL

City & State

FT. LAUDERDALE, FL

Zip

33304

Country

USA

Zip

33304

Country

USA

6. Name and Address of Current Registered Agent

DEINHARDT, JOHN B.

2601 E. OAKLAND PARK BLVD.

SUITE 204

FT LAUDERDALE, FL 33306

7. Name and Address of New Registered Agent

Name
DEINHARDT, JOHN B.

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

918 NE 15th AVE., UNIT 1

City FORT LAUDERDALE

FL

33304

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

JOHN B. DEINHARDT

DATE

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

OFFICERS AND DIRECTORS

12.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

CPTD
DEINHARDT, JOHN B.
2601 E. OAKLAND PK BLVD., 204
FT. LAUDERDALE, FL 33306☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CPTDVS
DEINHARDT, JOHN B.
918 NE 15th AVE., UNIT 1
FORT LAUDERDALE, FL 33304☒ Change ☐ AdditionVS
DEINHARDT, ELIZABETH C.
2601 E. OAKLAND PK BLVD., 204
FT. LAUDERDALE, FL 33306☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ Addition☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ Addition☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ Addition☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ Addition☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ Change ☐ Addition

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

4/19/2000

Date

(954) 462-7774

Daytime Phone #

FILED
May 23, 2000 8:00 am
Secretary of State

05-23-2000 90190 014 ***150.00

A0048666

DO NOT WRITE IN THIS SPACE

CR2E034 (9/99)