**FILED** 

Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90040 037 \*\*\*150.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999

## DOCUMENT # **V68452** 1. Corporation Name

U.K. LEISURE HOLDING CO., INC.

Principal Place	e of Business		Mailing A	Address							
2600 MAITLAND CENTER PKWY. SUITE 330 MAITLAND FL 32751  2600 MAITLAND CENTER PKWY. SUITE 330 MAITLAND FL 32751  MAITLAND FL 32751					KWY.						
									DO NOT WRITE IN THIS SPACE		
MAITLAND FL 3	32/51		MAILANL	) FL 32/31					3. Date Incorporated or Qualifed		
									09/30/1992		
2. Principal Pl	lane of Rusine	ee	2a. Mailir	ng Address					4. FEI Number Applied For		
21	lace of Dosine	33	26	.9 / 10					<b>59-3143174</b> Not Applicable		
Suite, Apt.	# etc			, Apt. #, etc.					\$8.75 Additional		
22	,, <del>-</del> , -, -, -, -, -, -, -, -, -, -, -, -, -,	<u> </u>	27					5. Certificate of Status Desired Fee Required			
City & State	.e		City & State					6. Election Campaign Financing \$5.00 May Be			
23			28						Trust Fund Contribution Added to Fees		
Zip		Country	Zip		Cou	ntry			8. This corporation owes the current year Intangible		
24	12	:5	29		30				Personal Property Tax. Yes MNo		
		and Address of Curre	nt Registered	Agent					10. Name and Address of New Registered Agent		
		<del></del>				81	Nam	е			
PARKS, LINDA						82	Stree	Street Address (P.O. Box Number is Not Acceptable)			
2600 MAITLAND CENTER PKWY.							•				
SUITE 330					. *	83					
MAITLAND FL 32751						84	City	City 85 Zip Code			
							-		FL		
l office or r	anc harateina	ons of Sections 607.05 nt, or both, in the Stat n, and accept the oblig	on Florida Suc	ch change was al	uthonzec	עם נ	tne co	d corpor poration	oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered		
SIGNATURE											
<u>.</u>	Signature, typed o	r printed name of registered as				l Agen	st signatu	e required	d when reinstating) DATE		
12.		OFFICERS A	ND DIRECTOR		13.				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D			☐ DELETE	1.1 11				C Glange Addition		
NAME	PARKS, LI				1.2 N/						
STREET ADDRESS		LAND CENTER PK	NY. #330		1.3 51	FREET	ADDRES	is			
CITY-ST-ZIP	MAITLAND	FL 32751			_	TY-\$	T-ZiP	—	☐ Change ☐ Additi		
TITLE		_		☐ DELETE	2.1 Ti						
NAME		;			2.2 N	AME					
STREET ADDRESS					2.3 \$	TREET	FADDRES	S			
CITY-ST-ZIP					2.4 C		T-ZIP	_	Change		
TITLE				☐ DELETE	3.1 77			-	Change Addition		
NAME					3.2 N	AME		1			
STREET ADDRESS	1				3.3 \$	TREET	ADDRES	SS			
CITY-ST-ZIP					3.4. C		T-ZIP		DAL DAJJE		
TITLE				☐ DELETE	4.1 TI	TLE			☐ Change ☐ Additi		
NAME	}				4.2N	AME		-			
STREET ADDRESS					4.3 5	TREET	TADDRES	ss	•		
CITY-ST-ZIP					_	ITY-S	T-ZIP				
TITLE				☐ DELETE	5.1 TI				☐ Change ☐ Additi		
	1				5.2 N	AME		- 1			

CITY-ST-ZIP 14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all effect is empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

DELETE

Change

☐ Addition