

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90255 016 ****61.25

DOCUMENT # N98000007061

1. Entity Name
CCRC DEVELOPMENT, INC.

Principal Place of Business 13607 NW 50TH AVE GAINESVILLE FL 32606	Mailing Address 13607 NW 50TH AVE GAINESVILLE FL 32606-3562
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2. Principal Place of Business 926 N.W. 13th Street	3. Mailing Address P.O. Box 14501
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Gainesville, Florida	City & State Gainesville, Florida	4. FEI Number 59-3562098	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
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Zip 32604-2501	Country	Zip 32604-2501	Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent REMERT, DAVIS M JR 13607 NW 50TH AVE GAINESVILLE FL 32606		7. Name and Address of New Registered Agent		
		Name		
		Street Address (P.O. Box Number is Not Acceptable)		
		City FL Zip Code		

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW:
FEE IS \$61.25**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

**Make Check Payable to
Department of State**

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DUCKWORTH, FRANK A MR 2090 HUNTERS CREST WAY VIENNA VA 22181-2840 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Robert A. Bryan 2012 West University Avenue Gainesville, FL 32603 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD BRAM, LESLIE D ESQ UF FOUNDATION - 2012 WEST UNIV AVE. GAINESVILLE FL 32603 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jeffrey W. Dwyer Rm. 5234, 1329 Building, University of Florida Gainesville, FL 32610-0177 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FRANK, ROBERT G DEAN 1600 S.W. ARCHER RD., RM N1-2 GAINESVILLE FL 32610 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Richard A. Gutekunst 3942 N.W. 25th Circle Gainesville, FL 32606-7435 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DELANEY, PAULA 75 S.W. 23RD WAY GAINESVILLE FL 32607 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Samuel N. Holloway, Sr. 1405 N.W. 13th Street Gainesville, FL 32601 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Davis M. Renbert, Jr. 13607 N.W. 50th Avenue Gainesville, FL 32606 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D E.T. York Building 106, Mowry Rd., University of Florida Gainesville, FL 32611 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE OF DAVIS M. REMERT, JR. Date: 4/6/00 Daytime Phone #: 352 392 5495

CR2E037 (9/99)