

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

0089848

DOCUMENT # 723528

1. Entity Name

ASSOCIATION OF POINCIANA VILLAGES, INC.

03-29-2002 91076 001 ***630.00

Principal Place of Business 401 WALNUT ST KISSIMMEE FL 34759 US	Mailing Address 401 WALNUT ST KISSIMMEE FL 34759 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-1514293	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

BROWN, ROCKELL Y
401 WALNUT ST
KISSIMMEE FL 34759

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HATCHER, WALTER F 401 WALNUT STREET KISSIMMEE FL 34759	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASTD IORIO, ANTHON T S JR 401 WALNUT STREET KISSIMMEE FL 34759	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PASHLEY, JEFFREY C 4100 PLEASANT HILL RD KISSIMMEE FL 34759	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD COUCH, DAVID E 401 E WALNUT KISSIMMEE FL 34759	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD COUCH, DAVID E. 401 WALNUT STREET KISSIMMEE, FL 34759	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD EMERSON, MARY E. 401 WALNUT STREET KISSIMMEE, FL 34759	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD PASHLEY, JEFFREY C. 4100 PLEASANT HILL ROAD KISSIMMEE, FL 34759	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input 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: *Mary E. Emerson* **Mary E. Emerson** 3/20/02 (863) 427-0900

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)



Association of Poinciana Villages, Inc.
Administration Offices
401 Walnut Street
Poinciana
Kissimmee, Florida 34759-4329
(863) 427-0900
(863) 427-0500 Fax

attachment # 72359

March 20, 2002

Division of Corporations
Uniform Business Report Filings
Post Office Box 1500
Tallahassee, FL 32302-1500

RE: Annual Reports-
Association of Poinciana Villages, Inc., and
Poinciana Village One through to Village Eight Associations, Inc.

CERTIFIED MAIL
RETURN RECEIPT REQUESTED
7000 0520 0016 5645 7628

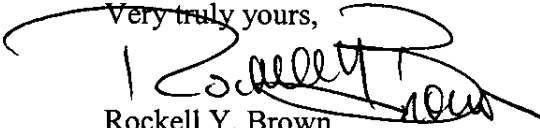
Gentlemen:

I enclose for filing, our nine (9) documents that represent each corporation in our jurisdiction. I also enclose our company check in the amount of \$630.00 to cover the costs of filing our 2002 Annual Reports with the State of Florida.

Please forward the Pre-paid Certificates of Status me at the address listed upon the reports in Column Block 6.

Additionally, in previous years, it seems that our check and reports, once received by the State, are often misplaced, and/or separated from each other, thus causing a dilemma in our timely filings. I request your kind attention to this matter.

Very truly yours,


Rockell Y. Brown
Registered Agent
Association of Poinciana Villages, Inc.

/ryb

enc: Check # 040857- \$630.00