

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 733836

1. Entity Name

ERROL OAKS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

ATTWOOD-PHILLIPS, INC.
1350 ORANGE AVENUE, SUITE 100
WINTER PARK FL 32789
US

ATTWOOD-PHILLIPS, INC.
P.O. BOX 1208
WINTER PARK FL 32790-1208

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PHILLIPS, ROGER V
1350 ORANGE AVENUE
WINTER PARK FL 32790-1208

Name

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

City

FL

Zip Code



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-1633269

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

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 PD
NAME RICHARDS, BILL
STREET ADDRESS 1409 J OAK PLACE
CITY-ST-ZIP APOPKA FL 32712

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME SPARKS, CAROLE
STREET ADDRESS 1404 G OAK PLACE
CITY-ST-ZIP APOPKA FL 32712

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE SD
NAME MCGUIRE, HELEN
STREET ADDRESS 1477 OAK PLACE
CITY-ST-ZIP APOPKA FL 32712

☐ Delete

TITLE D
NAME
STREET ADDRESS
CITY-ST-ZIP

☒ Change ☐ Addition

TITLE VTD
NAME STRICKLAND, JIM
STREET ADDRESS 1409 OAK PLACE
CITY-ST-ZIP APOPKA FL 32712

☒ Delete

TITLE V
NAME JOHN BOEHL
STREET ADDRESS 1409 D OAK PLACE
CITY-ST-ZIP APOPKA, FL. 32712

☐ Change ☒ Addition

TITLE D
NAME TAYLOR, BEVERLY
STREET ADDRESS 1409 A OAK PLACE
CITY-ST-ZIP APOPKA FL 32712

☐ Delete

TITLE S/T
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ 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:

William Richards

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/00 407.886-5702

Date

Daytime Phone #