

2002 UNIFORM BUSINESS REPORT (UBR)

7/31

FILED
Aug 13, 2002 8:00 am
Secretary of State

07-31-2002 90105 023 ****61.25

DOCUMENT # 745918

1. Entity Name

TIPPECANOE VILLAGE HOMEOWNERS ASSOCIATION OF ZEPHYRHILLS, FLORIDA, INC.

Principal Place of Business

Mailing Address

34521 IRIS BLVD.
 ZEPHYRHILLS FL 33541

34521 IRIS BLVD.
 ZEPHYRHILLS FL 33541

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

59-1885807

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MCALVANAH, THOMAS P.A.
5779 GAIL BLVD
ZEPHYRHILLS FL 33541

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**After September 13, 2002,
 min. will be \$236.25.**

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	PT POLLART, ROBERT 34704 MORNING GLORY GLEN ZEPHYRHILLS FL 33541	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JOHNSON, ROY 34711 LILLY LANE ZEPHYRHILLS FL 33541	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT PALMER, CHUCK 34604 ROSE BUD ROW ZEPHYRHILLS FL 33541	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VO LEMAY, IRENE 3428 OSAGE DR. ZEPHYRHILLS FL 33541	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP DASHNAW, JIM 3445 DAVNS DELL ZEPHYRHILLS FL 33541	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BENSLEY, MIMI 3243 CARNATION LANE ZEPHYRHILLS FL 33541	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ROUNDY, JAMES 3330 CARNATION LANE ZEPHYRHILLS FL 33541	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	X REHM, JOHN 34637 ROSEBUD ROW ZEPHYRHILLS FL 33541	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	X DOLORES MORROW 34604 MORNING GLORY ZEPHYRHILLS FL 33541	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP ANDERSON, PAT 34636 ROSEBUD ROW ZEPHYRHILLS FL 33541	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BAUIER, KAREN 3324 OSAGE DRIVE ZEPHYRHILLS FL 33541	☒ 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: X

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

X 7/25/02

X (813) 782-6590

CR2E037 (4/02)