2002 UNIFORM BUSINESS REPORT (UBR)

STGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: .

DOCUMENT # 748972					Secretary of State 04-07-2002 90576 042 ****61.25				
FORES	r Park III Property own	ers' association, i	N	•		04-07-2002 9	90576 042 **	**61.25	
Principal Place of Business Mailing Address					1 .				
PO 80X 802 ARCHER FL 32618 US		P.O. BOX 602 Archer Fl 32618 US			o ~ o 1 0				
Principal Place of Business 3. Mailing Address			,						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. FEI Number 59-2087158 Applied For [Not Applied For [Not Applicable]]				
Zip	Country	Zip	Country		5. Certificate of S		¬ \$8.75 ∧		
	- 8. Name and Address of Curre	nt Registered Agent.	·		7. Name and Ad	dress of New Regist	Fee Requirement	0 0	
 			N	ame					
TORRES, TERRY 11350 NW 123RD PLACE				Street Address (P.O. Box Number is Not Acceptable)					
12051 N.W. 108 TERR									
ARCHER'FL 32618			Ci	•	FL Zip Code				
SIGNATURE	e named entity submits this statement	or the purpose of changing it	s ragistered of	fice or register	ed agent, or both, in	n the state of Florida.	1/2 51	loa	
	Signature, typed or printed name of registered age	rt and title if applicable. (NO	E Registered Ager	t signature required	when reinstating)		DATE /		
	FILE NOW: FEE IS \$61.25	9. Election Ca Trust Fund	impaign Finant Contribution	cing 🗀	\$5.00 May Be Added to Fees		heck Payable rtment of Stat		
TITLE	OFFICERS AND E		11.			ES TO OFFICERS AN			
NAME	RICHTER, DAVID G	Delete	TITLE NAME		isidust	-idmo0	J Change	DAAddilloon 55	
STREET ADDRESS CITY-ST-ZIP	11450 NW 111TH AVE ARCHER FL 32618		STREET ADE	- I		oldman		037	
TITLE	סד	Detete	TITLE	Vn		11 Ave Arc	☐ Change	OF HORIDON ED	
NAME STREET ADDRESS	BROWN, ARTHUR W NA 12451 NE 101ST COURT ST			1.	Wichor Angether				
CITY-ST-ZIP	ARCHER FL 32618		STREET ADO			III Au	Act F	37618	
TITLE	SD TORRES, TERRY	☐ Delete	TITLE	Dik	idor		☐ Change	Midition	
STREET ADDRESS	11350 NE 123RD PLACE		STREET ADD		d Cha	ρ / Λ			
CITY-ST-ZIP	ARCHER FL 32618		CITY-ST-ZU	Lias	50 NE	III Ave	Archy	F1 3244	
TITLE NAME	JENKINS, DRU	1≥ Delete	TITLE NAME				☐ Change	☐ Addition	
STREET ADDRESS	12550 NE 101ST CT		STREET ADD						
CITY-SI-ZIP	ARCHER FL: 32618	Delete	CITY-ST-ZIF	<u> </u>	 -				
NAME	CARLIDE, CARL W	U€ Delete	TITLE NAME				☐ Change	☐ Addition	
	10551 NE 131ST PL ARCHER FL 32618		STREET ADDI						
TITLE	PHYSILET I E OZOTO	☐ Delete	TITLE	<u> </u>			☐ Change	Addition	
NAME STREET ADDRESS			NAME						
CITY-ST-ZIP			STREET ADDR	ESS					
	ertify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emp or on an attachment with an address,		the exemption ny signature sh as required by	stated in Sect all have the sa Chapter 617,	tion 119.07(3)(i), Flo tme legal effect as if Florida Statutes; and	rida Statutes. I furthe made under oath; th I that my name appe	r certify that the ir at I am an officer ars in Block 10 or	or director Block 11 if	

Date

Daytime Phone #