

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 754660

1. Entity Name

CASSEL CREEK PROPERTY OWNERS' ASSOCIATION, INCOR

FILED
Feb 16, 2000 8:00 am
Secretary of State

02-16-2000 90037 026 ****61.25

Principal Place of Business	Mailing Address
2571 DERBYSHIRE CIR CASSELBERRY FL 32707-5650 US	2571 DERBYSHIRE CIR CASSELBERRY FL 32707-5650 US

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



DO NOT WRITE IN THIS SPACE

4. FEI Number	Applied For
NOT APPLICABLE	Not Applicable

5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

WHELLER, PEGGY S
2571 DERBYSHIRE CIR
CASSELBERRY FL 32707-5650

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 _____
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
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10. OFFICERS AND DIRECTORS

TITLE	PD	☐ Delete
NAME	WHEELER, CHARLES E	
STREET ADDRESS	2571 DERBYSHIRE CIR	
CITY-ST-ZIP	CASSELBERRY FL	
TITLE	VPB	☐ Delete
NAME	PETERSON, MARY	
STREET ADDRESS	2587 DERBY	
CITY-ST-ZIP	CASSELBERRY FL	
TITLE	SD	☐ Delete
NAME	BRUMBAUGH, JANET	
STREET ADDRESS	2545 DERBY	
CITY-ST-ZIP	CASSELBERRY FL	
TITLE	I	☐ Delete
NAME	WARD, ANNETTE	
STREET ADDRESS	2585 DERBYSHIRE CIR	
CITY-ST-ZIP	CASSELBERRY FL	
TITLE	S	☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Board Member - D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VP S - D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Board Member - D	☒ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S - D	☐ Change ☒ Addition
NAME	MARGARET SCOTT	
STREET ADDRESS	2547 DERBYSHIRE CIR	
CITY-ST-ZIP	CASSELBERRY FL 32707-5650	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: CHARLES E. WHEELER - President 1-25-00 407/331-4798
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)