2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

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FILED
Mar 17, 2003 8:00 am
Secretary of State
02-26-2003 90127 031 ****61.25

DOCUMENT # 755753

1. Entity Name
SEPTEMBER ESTATES HOME OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
HOME OWNERS ASSO. INC. P.O. BOX 339 BOKEELIA FL 33922	HOME OWNERS ASSO. INC. P.O. BOX 339 BOKEELIA FL 33922

☑ CHECK HERE IF MAKING CHANGES

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 59-2337724 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

~~BOLDUC, THERESE~~
~~7720 FARRELL RD~~
~~BOKEELIA FL 33922-8912~~

7. Name and Address of New Registered Agent

Name CLIFFORD, CAROLE T Treasurer
Street Address (P.O. Box Number Is Not Acceptable) 7679 FARRELL ROAD
City BOKEELIA FL Zip Code 33922

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 CAROLE CLIFFORD Carole M Clifford 2-23-03
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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~P~~ T MCCOY, ME 7601 FARRELL ROAD BOKEELIA FL 33922	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHNEIDER, HAROLD 15227 SUSAN KAY RD BOKEELIA FL 33922	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~P~~ ~~ECKER, LOU~~ ~~7711 FARRELL RD~~ ~~BOKEELIA FL 33922~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P T ECKER, LOU 7648 CARPENTER Road BoKeelia, FL 33922 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~T~~ ~~BOLDUC, THERESE L~~ ~~7720 FARRELL ROAD~~ ~~BOKEELIA FL~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~Secretary~~ T ECKER, SUE 7648 CARPENTER ROAD BoKeelia, FL 33922 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D O'DONNELL, MICHAEL 7664 FARRELL RD BOKEELIA FL 33922	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD ~~SCHRIMMELL, JIM~~ ~~7743 FARRELL ROAD~~ ~~BOKEELIA FL 33922~~	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~Secretary~~ D, Colasuree, DORIS 15210 Buzzard Cut BoKeelia, FL 33922 ☐ Change ☒ Addition

CR2E037 (10/02)

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: SIGNATURE REQUIRED President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — 239-283-7935 Daytime Phone #