

2000-UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

757409

Amended

APPROVED
AND
FILED

00 OCT 27 PM 12:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

Columbus Harbour Homeowners' Association, Inc.

Principal Place of Business

Mailing Address

PO Box 520268
Longwood, Florida 32752-0268

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 592362974

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

Dan Anderson
330 Isabella Drive
Longwood, Florida 32750

7. Name and Address of New Registered Agent

Name Neal McCulloh

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

1065 Maitland Center Commons Blvd.

City Maitland

FL

Zip Code 32751

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)

700003465227--4
Neal McCulloh, 11/15/00-01/15/01
*****61.25 *****61.25

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

TITLE NAME Dan Anderson, PD ☒ Delete
STREET ADDRESS 330 Isabella Drive
CITY-ST-ZIP Longwood, Florida 32750

TITLE NAME Barry Revels, VD ☒ Delete
STREET ADDRESS 400 Columbus Circle
CITY-ST-ZIP Longwood, Florida 32750

TITLE NAME Susan Cheslick, SD ☒ Delete
STREET ADDRESS 481 Columbus Circle
CITY-ST-ZIP Longwood, Florida 32750

TITLE NAME Bonnie Mack, TD ☒ Delete
STREET ADDRESS 140 Columbus Circle
CITY-ST-ZIP Longwood, Florida 32750

TITLE NAME Dan Spak, D ☒ Delete
STREET ADDRESS 120 Columbus Circle
CITY-ST-ZIP Longwood, Florida 32750

TITLE NAME Siva Dellamotta, D ☒ Delete
STREET ADDRESS 710 Palos Way
CITY-ST-ZIP Longwood, Florida 32750

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME James R. Seibert, PD ☐ Change ☒ Addition
STREET ADDRESS 320 Isabella Drive
CITY-ST-ZIP Longwood, Florida 32750

TITLE NAME Richard D. Knight, VPD ☐ Change ☒ Addition
STREET ADDRESS 141 Columbus Circle
CITY-ST-ZIP Longwood, Florida 32750

TITLE NAME Rick Kuzmick, SD ☐ Change ☒ Addition
STREET ADDRESS 480 Columbus Circle
CITY-ST-ZIP Longwood, Florida 32750

TITLE NAME Susan S. Terrett, TD ☐ Change ☒ Addition
STREET ADDRESS 151 Columbus Circle
CITY-ST-ZIP Longwood, Florida 32750

TITLE NAME Dave Shaffer, D ☐ Change ☒ Addition
STREET ADDRESS 131 Columbus Circle
CITY-ST-ZIP Longwood, Florida 32750

TITLE NAME Jack Smythers, D ☐ Change ☒ Addition
STREET ADDRESS 331 Isabella Drive
CITY-ST-ZIP Longwood, Florida 32750

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James R. Seibert

Date

Daytime Phone #

CR2E037 (9/99)