

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

FILED
Mar 03, 2003 8:00 am
Secretary of State

02-05-2003 90134 045 ***61.25

DOCUMENT # 759024

1. Entity Name
DUPLIX VILLAGE HOMEOWNERS ASSOCIATION II, INC.



Principal Place of Business
**2189 CLEVELAND STREET
SUITE 225
CLEARWATER FL 33765**

Mailing Address
**2189 CLEVELAND STREET
SUITE 225
CLEARWATER FL 33765**

2. Principal Place of Business
**2240 Belleair Rd.
Suite, Apt. #, etc.
140
City & State
Clearwater, FL**

3. Mailing Address
**2240 Belleair Rd.
Suite 140
City & State
Clearwater, FL**



☐ CHECK HERE IF MAKING CHANGES

Zip
33764

Country
USA

Zip
33764

Country
USA

4. FEI Number **59-2186996**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**LEIGHTON, LENNARD
2189 CLEVELAND STREET
STE 225
CLEARWATER FL 33765**

7. Name and Address of New Registered Agent

Name **J. Michael Daily, CPA**
Street Address (P.O. Box Number is Not Acceptable) **2240 Belleair Rd. #140**
City **Clearwater** FL **33764**

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

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

TITLE	VPD	☐ Delete
NAME	JUSTINI, ROBERT	
STREET ADDRESS	3368 GORSE COURT	
CITY-ST-ZIP	PALM HARBOR FL 37684	
TITLE	SD	☐ Delete
NAME	MCCELHOES, ROBERT	
STREET ADDRESS	3234 MCMATH DRIVE	
CITY-ST-ZIP	PALM HARBOR FL 34684	
TITLE	TD	☒ Delete
NAME	LARSON, ELMER	
STREET ADDRESS	3281 MCMATH DRIVE	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	PD	☒ Delete
NAME	ATKERSON, COLLEEN	
STREET ADDRESS	3032 MCMATH DRIVE	
CITY-ST-ZIP	PALM HARBOR FL 34684	
TITLE	D	☒ Delete
NAME	INDERWISH, JACK	
STREET ADDRESS	3207 MCMATH DRIVE	
CITY-ST-ZIP	PALM HARBOR FL 34684	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☒ Change ☐ Addition
NAME	Robert Justiana	
STREET ADDRESS	President	
CITY-ST-ZIP		
TITLE	* Sec./Treas.	☐ Change ☒ Addition
NAME	Helen Borders	
STREET ADDRESS	3337 Gorse Ct.	
CITY-ST-ZIP	Palm Harbor, FL 34684	
TITLE		☐ Change ☒ Addition
NAME	Robert McElhoes	
STREET ADDRESS	Vice President	
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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:

Robert M. Elhoes
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-29-03
Date

727-507-9133
Daytime Phone #

CR2E037 (10/02)