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2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 11, 2000 8:00 am
Secretary of State
03-20-2000 90142 042 ****61.25

DOCUMENT # 765634

1. Entity Name

KANUGA VILLAGE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
POST OFFICE BOX 700 434 ST. CLOUD FL 34770	POST OFFICE BOX 700434 ST. CLOUD FL 34770-0434

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 59-2894470 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BUCHOLTZ, WILLIAM G 1978 CRYSTAL LANE ST CLOUD FL 34769	Name: DAVID BRUEGGMANN Street Address (P.O. Box Number is Not Acceptable): 2398 TEMPLE LN. City: ST CLOUD FL Zip Code 34769

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	MEMBER AT LARGE T	☐ Delete	PRESIDENT.	☒ Change ☐ Addition
NAME	VENEGAS,		DAVID BRUEGEMANN	
STREET ADDRESS	1870 CACTUS COURT		2398 TEMPLE LANE	
CITY-ST-ZIP	ST. CLOUD FL 34769		ST. CLOUD, FL 34769	
TITLE	S D	☒ Delete	TREASURER	☒ Change ☐ Addition
NAME	ANN KEENAN		MARVEL REICH	
STREET ADDRESS	2342 TEMPLE		1874 BRAMBLEWOOD DR.	
CITY-ST-ZIP	ST CLOUD FL 34769		ST CLOUD FL 34769	
TITLE	SD	☒ Delete	SECRETARY	☒ Change ☐ Addition
NAME	HUNT, CATHERINE M		RONELLE MOOR	
STREET ADDRESS	1842 CACTUS COURT		BRAMBLEWOOD DR.	
CITY-ST-ZIP	ST. CLOUD FL 34769		ST. CLOUD, FL 34769	
TITLE	P D	☒ Delete	VICE PRESIDENT	☒ Change ☐ Addition
NAME	WILLIAM BUCHOLTZ		ROY SHAUGER	
STREET ADDRESS	1978 CRYSTAL LN		1810 CACTUS	
CITY-ST-ZIP	ST CLOUD FL 34769		ST CLOUD, FL 34769	
TITLE	VP D	☒ Delete	~~TREASURER~~ T	☒ Change ☐ Addition
NAME	ROBERT LANTZ		KATHYRN ROGERS	
STREET ADDRESS	2220 DARBY LN		2310 LAKOTA LN.	
CITY-ST-ZIP	ST CLOUD FL 34769		ST CLOUD, FL 34769	
TITLE	T D	☒ Delete	MEMBER AT LARGE T	☐ Change ☐ Addition
NAME	GLENDA PRUITT		JEAN LIEKHUS	
STREET ADDRESS	1961 CRYSTAL LN		2445 LAKOTA LANE	
CITY-ST-ZIP	ST CLOUD FL 34769		ST CLOUD, FL 34769	

CR2E037 (9/99)

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: X Dave Bruggemann — 2/29/2000 — (407) 957-3576
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

DAVID BRUEGGEMANN

See ATTACHED Sheet