

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**May 10, 2001 8:00 am**  
**Secretary of State**  
 05-10-2001 90077 008 \*\*\*\*70.00

**DOCUMENT # 767645**

1. Entity Name

ROSE HOLLOW HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

3127 BROCKTON WAY  
 TALLAHASSEE FL 32312

Mailing Address

1404 STURBRIDGE PLACE  
 AT ROSEHOLLOW  
 TALLAHASSEE FL 32312  
 US

2. Principal Place of Business

1405 STURBRIDGE PL

3. Mailing Address

1405 STURBRIDGE PL

Suite, Apt. #, etc.

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State  
 TALLAHASSEE FL

City & State  
 TALLAHASSEE FL

4. FEI Number  
 59-2667497

Applied For  
 Not Applicable

Zip  
 32312

Country  
 LEON

Zip  
 32312

Country  
 LEON

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSTON, WENDY L  
 1404 STURBRIDGE PLACE  
 ROSEHOLLOW  
 TALLAHASSEE FL 32312

7. Name and Address of New Registered Agent

Name - DOTTIE HUTCHISON

Street Address (P.O. Box Number is not acceptable)  
 1405 STURBRIDGE PL

City TALLAHASSEE FL Zip Code 32312

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 Dottie Hutchison DOTTIE HUTCHISON, SECRETARY 4/26/01  
 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

TITLE TD  
 NAME JOHNSTON, WENDY LEADER ☒ Delete  
 STREET ADDRESS 1404 STURBRIDGE PLACE  
 CITY-ST-ZIP TALLAHASSEE FL

TITLE SD  
 NAME HUTCHISON, DOTTIE ☐ Delete  
 STREET ADDRESS 1405 STURBRIDGE PLACE  
 CITY-ST-ZIP TALLAHASSEE FL

TITLE DP  
 NAME BESSERER, ROBERT ☒ Delete  
 STREET ADDRESS 3115 BROCKTON WAY  
 CITY-ST-ZIP TALLAHASSEE FL

TITLE D  
 NAME CLARK, MARY ☒ Delete  
 STREET ADDRESS 3127 BROCKTON WAY  
 CITY-ST-ZIP TALLAHASSEE FL

TITLE D  
 NAME HAYES, ANNETTE ☐ Delete  
 STREET ADDRESS 3170 BROCKTON WAY  
 CITY-ST-ZIP TALLAHASSEE FL

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D/T  
 NAME NANCY RICE ☐ Change ☒ Addition  
 STREET ADDRESS 3117 BROCKTON WAY  
 CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE D  
 NAME ALICE SELLERS ☐ Change ☒ Addition  
 STREET ADDRESS 3161 BROCKTON WAY  
 CITY-ST-ZIP TALLAHASSEE FL 32312

TITLE D  
 NAME PAT HARPER ☐ Change ☒ Addition  
 STREET ADDRESS 3157 BROCKTON WAY  
 CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE D  
 NAME GINNY ROBERTS ☐ Change ☒ Addition  
 STREET ADDRESS 1800 ATLANTIS PL  
 CITY-ST-ZIP TALLAHASSEE 32303

TITLE D/P  
 NAME HAYES, ANNETTE ☒ Change ☐ Addition  
 STREET ADDRESS 3170 BROCKTON WAY  
 CITY-ST-ZIP TALLAHASSEE, FL 32312

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP ☐ Change ☐ Addition

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: Dottie Hutchison DOTTIE HUTCHISON 4/26/01 (850) 386-6428  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)