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

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 90484 027 ****61.25

DOCUMENT # 769925

1. Entity Name

BELLE OAKS TOWNHOUSES ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2180 WEST SR 434. SUITE 5000 LONGWOOD FL 32779-5044 US	2180 WEST SR 434. SUITE 5000 LONGWOOD FL 32779-5044 US

☐ 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 59-2891038 ☐ 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
HART, JAMES W JR SENTRY MANAGEMENT INC. 2180 W. SR 434., STE 5000 LONGWOOD FL 32779-5044	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WEISENBURGH, LOU 10754 SCOTT MILL RD #4 JACKSONVILLE FL 32217	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Lou Weisenburgh 10754 Scott Mill Rd #4 Jacksonville, FL 32217	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GRIFFITH, MARGE 10754 SCOTT MILL RD #9 JACKSONVILLE FL 32217	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP D Robert Zeis 10754 Scott Mill Rd #7 Jacksonville, FL 32217	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CLINTON, CAROLYN 1075 SCOTT MILL RD 15 JACKSONVILLE FL 32223	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Wendie Mayfield 10754 Scott Mill Rd # 6 Jacksonville, FL 32217	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD KEEVERS, TOM 10754 SCOTT MILL ROAD #16 JACKSONVILLE FL 32223	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Martha Barnes 10754 Scott Mill Rd # 14 Jacksonville, FL 32217	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHIFF, SHELLY 1075 SCOTT MILL RD 5 JACKSONVILLE FL 32273	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FREDRICKSON, ROXANNE 1075 SCOTT MILL RD 1 JACKSONVILLE FL 32217	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Roxanne Fredrickson 1075 Scott Mill Rd #1 Jacksonville FL 32217	☑ 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: Roxanne Fredrickson SIGNATURE REQUIRED Roxanne Fredrickson 3-19-03 904-886-2979