

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # **771154**

FILED

Entity Name
Chan's Glen Homeowners' Association, Inc.

00 SEP -5 PM 1:05

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Principal Place of Business Mailing Address
 3915 NE 22 Lane
 Ocala, Florida 34470 same

2. Principal Place of Business 3. Mailing Address
 same same
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country

4. FEI Number
~~59-2339861~~
 Applied For
 Not Applicable
 5. Certificate of Status Desired \$8.75 Additional Fee Required

Amended

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent
 Nancy Silano
 2224 NE 39th Ave.
 Ocala, Florida 34470

7. Name and Address of New Registered Agent
 Name
Yvonne Johnson
 Street Address (P.O. Box Number is Not Acceptable)
 3934 NE 21st Lane
 City Ocala FL Zip Code 34470

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 *Yvonne Johnson* 500002339861-4
 Signature, typed or printed name of registered agent and fee, if applicable (NOTE: Registered Agent signature required when registering)
 *****E1-25 *****E1-25

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees



10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Nancy Silano 2224 NE 39th Ave. Ocala, Fl. 34470 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President Tom Anderson 5010 NE 7th Pl. Ocala, Fl. 34470 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Susan Weeks 2303 NE 40th Ave. Ocala, Fl. 34470 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Dick Cole 2307 NE 40th Ave. Ocala, Fl. 34470 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Edward Smith 2301 NE 39th Ave. Ocala, Fl. 34470 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Jeanette Blair 3905 NE 22 Lane Ocala, Fl. 34470 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Fred Rucker 2218 NE 39th Ave. Ocala, Fl. 34470 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice-President Yvonne Johnson 3934 NE 21st Lane Ocala, Fl. 34470 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Judith Morrison 3920 NE 21st Lane Ocala, Fl. 34470 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Linda Holland 3925 NE 21st Lane Ocala, Fl. 34470 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Douglas McVey 3912 NE 21st Lane Ocala, Fl. 34470 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Maurice Silverman 2220 NE 39th Ave. Ocala, Fl. 34470 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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 empowerments.

Yvonne Johnson

CR2E037 (9/00)

SP