

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 27, 2003 8:00 am**  
**Secretary of State**

01-27-2003 90338 004 \*\*\*150.00

**DOCUMENT # K11038**



1. Entity Name  
**NEW RANCH MOBILE HOME PARK HOMEOWNERS ASSOCIATION, INC.**

Principal Place of Business  
**2291 GULF-TO-BAY BLVD.  
LOT ~~138~~ 213  
CLEARWATER FL 34625**

Mailing Address  
**2291 GULF-TO-BAY BLVD.  
LOT ~~138~~ 213  
CLEARWATER FL 34625**

**30011637**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

**LOT 213**

Suite, Apt. #, etc.

**LOT 213**

City & State

City & State

4. FEI Number **59-2982819**

Applied For  
Not Applicable

Zip

Country

Zip

Country

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

CHECK HERE IF MAKING CHANGES

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**WOOLSEY, W. WARREN  
2291 GULF-TO-BAY  
LOT ~~138~~ 213  
CLEARWATER FL 33765**

Name  
Street Address (P.O. Box Number is Not Acceptable)  
**LOT 213**  
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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

10. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> Delete
NAME	VONDERAU, JON P
STREET ADDRESS	2291 GULF TO BAY BLVD LOT 129
CITY-ST-ZIP	CLEARWATER FL 33765
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	PICKLESIMER, MARION
STREET ADDRESS	2291 GULF TO BAY, #121
CITY-ST-ZIP	CLEARWATER FL
TITLE	D <input checked="" type="checkbox"/> Delete
NAME	COX, GAYLE
STREET ADDRESS	2291 GULF TO BAY BLVD LOT 235
CITY-ST-ZIP	CLEARWATER FL 33765
TITLE	D <input type="checkbox"/> Delete
NAME	STEWART, JACK
STREET ADDRESS	2291 GULF TO BAY BLVD LOT 231
CITY-ST-ZIP	CLEARWATER FL 33765
TITLE	D <input type="checkbox"/> Delete
NAME	SIME, ALBERT
STREET ADDRESS	2291 GULF TO BAY BLVD LOT 326
CITY-ST-ZIP	CLEARWATER FL 33765
TITLE	TSD <input type="checkbox"/> Delete
NAME	WOOLSEY, W. WARREN
STREET ADDRESS	2291 GULF TO BAY BLVD LOT <del>138</del> 213
CITY-ST-ZIP	CLEARWATER FL 33765

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAM MILLS
STREET ADDRESS	2291 GULF TO BAY BLVD, LOT 118
CITY-ST-ZIP	CLEARWATER, FL 33765
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROBERT DANGERFIELD
STREET ADDRESS	2291 GULF TO BAY BLVD, LOT 330
CITY-ST-ZIP	CLEARWATER, FL 33765
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MELVIN MOORE
STREET ADDRESS	2291 GULF TO BAY BLVD, LOT 333
CITY-ST-ZIP	CLEARWATER, FL 33765
TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JEFF BOHRER
STREET ADDRESS	2291 GULF TO BAY BLVD, LOT 137
CITY-ST-ZIP	CLEARWATER, FL 33765
TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRUCE DORN
STREET ADDRESS	2291 GULF TO BAY BLVD, LOT 124
CITY-ST-ZIP	CLEARWATER, FL 33765
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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: W. WARREN WOOLSEY, W. Warren Woolsey 1/24/03 727-723-0695  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)