

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 13, 2002 8:00 am
Secretary of State

05-13-2002 90034 028 ****61.25

DOCUMENT # N00000000834

1. Entity Name

PARK HILL ESTATES HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
% RESIDENTAIL REALTY GROUP 201 PALM BEACH LAKES BLVD., SUITE 402 WEST PALM BEACH FL 33409	% RESIDENTAIL REALTY GROUP 2001 PALM BEACH LAKES BLVD., SUITE 402 WEST PALM BEACH FL 33409



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-1006347

Applied For

Not Applicable

Zip

Country

Zip

Country

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

RESIDENTIAL REALTY GROUP
 2001 PAL BEACH LAKES BLVD
 SUITE 402
 WEST PALM BEACH FL 33409

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.

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	PD	<input type="checkbox"/> Delete
NAME	SEXTON, RONALD D	
STREET ADDRESS	1023 PARK HILL DRIVE	
CITY-ST-ZIP	HAVERHILL FL 33417	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SPRY, JACK E	
STREET ADDRESS	1001 PARK HILL DRIVE	
CITY-ST-ZIP	HAVERHILL FL 33417	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	SEXTON, DONNA	
STREET ADDRESS	1023 PARK HILL DRIVE	
CITY-ST-ZIP	HAVERHILL FL 33417	
TITLE	TD	<input type="checkbox"/> Delete
NAME	PAYNE, PAMELA M	
STREET ADDRESS	1041 PARK HILL DRIVE	
CITY-ST-ZIP	HAVERHILL FL 33417	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILLIAMS, JOYCE	
STREET ADDRESS	1040 PARK HILL DRIVE	
CITY-ST-ZIP	HAVERHILL FL 33417	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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 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:

Ronald D Sexton
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-02

CR2E037 (9/01)