## **2002 UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

## Feb 17, 2002 8:00 am Secretary of State DOCUMENT # N00000005993 02-17-2002 90058 018 \*\*\*\*61.25 ISLAND OF KEY LARGO FEDERATION OF HOMEOWNER ASSO CIATIONS, INC. Principal Place of Business Mailing Address 428 COLLINS ST. PO BOX 702 ម្រាស់ក្នុងក្រុ KEY LARGO FL 33037 KEY LARGO FL 33037 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 65-1062501 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) WINKLER, BARBARA 428 COLLINS ST. KEY LARGO FL 33037 City 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11, TITLE PD Delete CR2E037 (9/01 TITLE ☐ Channe ☐ Addition NAME LANCASTER, RICHARD NAME STREET ADDRESS STREET ADDRESS 109 ELLINGTON CT. CITY-ST-ZIP CITY-ST-ZIP TAVERNIER FL 33070 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NICKERSON, FRED NAME STREET ADDRESS STREET ADDRESS 138 MARINA AVE. CITY-ST-7IP CITY-ST-ZIP KEY LARGO FL 33037 **D**elete TITLE TITLE TO Addition NAME WILKINSON, MARY. L NAME STREET ADDRESS STREET ADDRESS 38 E. BEACH RD. CITY-ST-7IP CITY-ST-ZIP TAVERNIER FL 33070 TITLE ☐ Delete TITLE Change ☐ Addition NAME NICKERSON, ANN NAME STREET ADDRESS STREET ADDRESS 138 MARINA AVE. CITY-ST-ZIP CITY-ST-ZIP Key Largo FL 33037 Delete Addition TITLE Change CANNON, BURKE NAME STREET ADDRESS 149 WESTMINSTER DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAVERNIER FL 33070 TITI F ☐ Delete TITLE □ Change ☐ Addition NAME PINO, RAY NAME STREET ADDRESS 309 LANCE LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP <u>Key Largo FL 33037</u> 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 instead to execute this eport 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.

**FILED**