2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00989

1. Entity Name

VILLAGE GROVE OF WINTER GARDEN HOMEOWNERS ASSOCI

Principal Place of Business Mailing Address 52 E SOUTH STREET 447 SAND LIME ROAD WINTER GARDEN FL 34787 ORLANDO FL 32801

Apr 27, 2001 8:00 am Secretary of State

04-27-2001 90241 032 ****61.25

	: :**										
2. Principal Pl	lace of Business		3. Mailing Address					## (11)			
Suite, Apt.	#, etc.	<u> </u>	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
·City & State	e		City & State			4. FEI Number 59-2414146 Applied For Not Applicable					
Zip		Country	Zip	Country		5. Certificate o	f Status Desired		8.75 Add ee Require		
America 2 and 1 3 3		7. Name and Address of New Registered Agent									
DON ASHER & ASSOCIATES INC 52 E SOUTH STREET					Name Street Address (P.O. Box Number is Not Acceptable)						
ORLANDO	FL 32801			City				FL	Zip Code	э	
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 NO		9. Election Campaign F Trust Fund Contribut		\$5.0 (Added	May Be to Fees		e Check P epartment		ı	
10.	<u> </u>	OFFICERS AND DIF	ECTORS	11.	Α	DDITIONS/CHA	NGES TO OFFICE	RS AND DIR	ECTORS IN	10	
TITLE NAME STREET ADDRESS	VD BOLLINGER, 1343 SAND	LIME RD	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D				X Change	Addition S	
CITY-ST-ZIP	TDS	RDEN FL 34787	☐ Delete	TITLE NAME	T/D	rt McCall	ohan		Change	Addition S	
NAME STREET ADDRESS CITY-ST-ZIP	Babocsi, Valeria 1201 S Park Ave Winter Garden Fl			STREET ADDRESS CITY-ST-ZIP	1351 Wint	ert McCallanan 1 Sand Lime Road ter Garden, Fl 34787					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FREMGEN, I 201 S PARK WINTER GAI	(AY AVE	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Poitras, Ei	DWARD BLVD SUITE 300	☐ Delete	TITLE NAME STREET ADORESS CITY-ST-ZIP	D				X Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRAMP, MAI 1329 WINTE		⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	444	lind Weid Sand Lime er Garden	Road		Change	★ Addition	
TITLE NAME STREET ADDRESS			☐ Delete	TITLE NAME STREET ADDRESS CITY_ST_7IP					☐ Change	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 empowered.