

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90055 024 ****61.25

DOCUMENT # N01000003796

1. Entity Name
ABERDEEN HOMEOWNERS ASSOCIATION OF PASCO, INC.

Principal Place of Business 325 SOUTH BLVD TAMPA FL 33606	Mailing Address 325 SOUTH BLVD TAMPA FL 33606
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address 15500 ROOSEVELT BLVD	
Suite, Apt. #, etc.		Suite, Apt. #, etc. STE 303	
City & State		City & State CLEARWATER, FL	
Zip	Country	Zip	Country
33760	USA	33760	USA

4. FEI Number **59-3758162** Applied For
 Not Applicable

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

**JAMES, JUDITH L
 325 SOUTH BLVD
 TAMPA FL 33606**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	NAME	TITLE	NAME
<input type="checkbox"/> Delete	D HAYDON, ROGERS K JR 15201 ROOSEVELT BLVD SUITE 112 CLEARWATER FL 33760	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	15500 ROOSEVELT BLVD #303
<input type="checkbox"/> Delete	D RUBIN, LESLIE A 15201 ROOSEVELT BLVD SUITE 112 CLEARWATER FL 33760	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	15500 ROOSEVELT BLVD #303
<input type="checkbox"/> Delete	D JAMES, JUDITH L 325 SOUTH BLVD TAMPA FL 33606	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input 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 empowered.

SIGNATURE: **K. HAYDON JR** Date: **1/18/02** Daytime Phone #: **727-539-0777**

CR2E037 (9/01)