

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 27, 2001 8:00 am**  
**Secretary of State**

03-27-2001 90003 010 \*\*\*\*61.25

0066849

**DOCUMENT # N05654**

1. Entity Name

**AMERICAN CONDOMINIUM PARKS-ZEPHYRHILLS, A CONDO**

Principal Place of Business

Mailing Address

35136 CONDOMINIUM BLVD.  
 ZEPHYRHILLS FL 33541

35136 CONDOMINIUM BLVD.  
 ZEPHYRHILLS FL 33541

**937191**



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

**59-2721252**

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

**MURPHY, DAVID J ATT.  
 GREENFELDER, MANDER, HANSON, MURPHY, & DWYER  
 14217 THIRD STREET  
 DADE CITY FL 33525**

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  Delete  
 NAME RENNER, WILLIAM  
 STREET ADDRESS 35108 CONDO BLVD.  
 CITY-ST-ZIP ZEPHYRHILLS FL 33541

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE VPD  Delete  
 NAME SMITH, JACK  
 STREET ADDRESS 4732 STUEY DR.  
 CITY-ST-ZIP ZEPHYRHILLS FL 33541

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE SD  Delete  
 NAME KLEINHANS, RUTHANN  
 STREET ADDRESS 35052 GARBER LN.  
 CITY-ST-ZIP ZEPHYRHILLS FL 33541

TITLE SD  Change  Addition  
 NAME REGINA REEVES  
 STREET ADDRESS 35142 DANNY DR.  
 CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE TD  Delete  
 NAME CALARESO, BARBARA  
 STREET ADDRESS 4845 ELWANA WAY  
 CITY-ST-ZIP ZEPHYRHILLS FL

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE ASD  Delete  
 NAME ZIEGLER, FRED  
 STREET ADDRESS 4854 BAKER LANE  
 CITY-ST-ZIP ZEPHYRHILLS FL 33541

TITLE 2-VPD  Change  Addition  
 NAME HAROLD GREEN  
 STREET ADDRESS 4807 ELWANA WAY  
 CITY-ST-ZIP ZEPHYRHILLS, FL 33541

TITLE  Delete  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Change  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:** *[Signature]*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/27/01**  
 Date

Daytime Phone #

CR2E037 (10/00)