

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N06103

FILED
Mar 20, 2002 8:00 AM
Secretary of State

Entity Name: STEEPLECHASE TOWNHOMES OWNERS' ASSN., INC.

Current Principal Place of Business:

2753 STATE RD 580
207
CLEARWATER, FL 33761 US

New Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

Current Mailing Address:

2753 STATE RD 580
207
CLEARWATER, FL 33761 US

New Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

FEI Number: 59-2469252

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
2753 STATE RD 580
SUITE 207
CLEARWATER, FL 33761

Name and Address of New Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685

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: MAUREEN C. REARDON

03/20/2002

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: DOTY, WILLIAM
Address: 274 BUCKINGHAM DRIVE
City-St-Zip: PALM HARBOR, FL 34684

Title: SD () Delete
Name: SHACK, SONIA
Address: 346 BUCKINGHAM PLACE
City-St-Zip: PALM HARBOR, FL 34684

Title: TD () Delete
Name: EARLE, LUCILE
Address: 190 HUNTER COURT
City-St-Zip: PALM HARBOR, FL 34684

Title: PD () Delete
Name: COPPOLA, PETER
Address: 177 HUNTER COURT
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: BELL, CHARLES
Address: 153 HUNTER COURT
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: PETRUZZI, JERRY
Address: 154 HUNTER COURT
City-St-Zip: PALM HARBOR, FL 34684

Title: STD (X) Change () Addition
Name: BANE, DAVE
Address: 141 HUNTER COURT
City-St-Zip: PALM HARBOR, FL 34684

Title: D (X) Change () Addition
Name: EARLE, LUCILE
Address: 190 HUNTER COURT
City-St-Zip: PALM HARBOR, FL 34684

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER COPPOLA

PD

03/20/2002

Electronic Signature of Signing Officer or Director

Date