

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2001 8:00 am
Secretary of State

08-29-2001 90007 012 ****70.00

DOCUMENT # N06189
1. Entity Name
 EAGLE ESTATES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business **Mailing Address**
 Post Office Box 15553 Post Office Box 15553
 Clearwater, FL 34629-5553 Clearwater, FL 34629-5553

B0062789

2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

DO NOT WRITE IN THIS SPACE

4. FEI Number **Applied For**
 59-2483465 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**

Renton, John B.
 2985 Eagle Estates Circle West
 Clearwater, Florida 34621

Name Markham, Michael C.
 Street Address (P.O. Box Number is Not Acceptable)
 911 Chestnut Street
 City Clearwater, FL Zip Code 33756

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 *Neil C. Lee* DATE 8/22/01

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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Morelli, Nena 2992 Talon Drive Clearwater, FL 33761 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Wilks, Vanessa 2984 Talon Drive Clearwater, FL 33761 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Dwyer, Lawrence 2968 Talon Drive Clearwater, FL 33761 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Dwyer, Lawrence 2968 Talon Drive Clearwater, FL 33761 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Markham, Michael C. 2960 Talon Drive Clearwater, FL 33761 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Markham, Michael C. 2960 Talon Drive Clearwater, FL 33761 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Lynch, Rae 2985 Talon Drive Clearwater, FL 33761 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Markham, Stephanie 2960 Talon Drive Clearwater, FL 33761 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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: *Neil C. Lee* President 8/22/01 727-461-1818 x140

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/00)

Attachment
Doc# N06189

JOHNSON, BLAKELY, POPE, BOKOR, RUPPEL & BURNS, P.A. B00062789

ATTORNEYS AND COUNSELLORS AT LAW

E. D. ARMSTRONG III
JOHN T. BLAKELY
BRUCE H. BOKOR
GUY M. BURNS
JONATHAN S. COLEMAN
MICHAEL T. CRONIN
ROBERT M. DAISLEY
ELIZABETH J. DANIELS
MARION HALE

SCOTT C. ILGENFRITZ
FRANK R. JAKES
TIMOTHY A. JOHNSON, JR.
SHARON E. KRICK
ROGER A. LARSON
JOHN R. LAWSON, JR.*
TRACY E. LEDUC
MICHAEL G. LITTLE
MICHAEL C. MARKHAM

STEPHANIE T. MARQUARDT
A.R. "CHARLIE" NEAL
F. WALLACE POPE, JR.
ROBERT V. POTTER, JR.
DONALD P. REED
DARRYL R. RICHARDS
PETER A. RIVELLINI
DENNIS G. RUPPEL*
CHARLES A. SAMARKOS

PHILIP M. SHASTEEN
JOAN M. VECCHIOLI
STEVEN H. WEINBERGER
AMBER F. WILLIAMS
JULIUS J. ZSCHAU

*OF COUNSEL

PLEASE REPLY TO CLEARWATER

FILE NO.

August 23, 2001

Florida Secretary of State
Division of Corporations
Post Office Box 1500
Tallahassee, Florida 32302-1500

Re: Eagle Estates Homeowners Association, Inc./Charter No. N06189

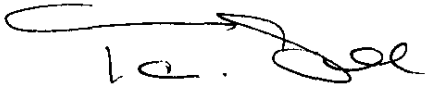
Dear Sir or Madam:

Enclosed is a fully executed original 2001 Uniform Business Report for the above-referenced entity. I have also enclosed our client's check in the amount of \$70.00 for the filing fee and certificate of status. Please file the enclosed report and forward to my attention a Certificate of Status.

In the event you have any questions regarding this request, please contact me immediately, via our firm's toll-free telephone number 1-800-523-1818, to avoid delay in mailing.

Sincerely,

JOHNSON, BLAKELY, POPE,
BOKOR, RUPPEL & BURNS, P.A.



Tami Lee Latzo, Legal Assistant

:tll

Enclosure

cc: Michael C. Markham, Esquire
246978.01

CLEARWATER OFFICE
911 CHESTNUT STREET
POST OFFICE BOX 1368
CLEARWATER, FLORIDA 33757-1368
TELEPHONE: (727) 461-1818
TELECOPIER (727) 462-0365

TAMPA OFFICE
100 NORTH TAMPA STREET
SUITE 1800
POST OFFICE BOX 1100
TAMPA, FLORIDA 33601-1100
TELEPHONE (813) 225-2500
TELECOPIER (813) 223-7118