

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 06, 2001 8:00 am
Secretary of State

02-06-2001 90338 001 ****70.00

DOCUMENT # N06980

1. Entity Name

VILLAGE HOMES AT COUNTRY WALK MASTER MAINTENANCE

Principal Place of Business

27501 S DIXIE HWY
 207
 HOMESTEAD FL 33032
 US

Mailing Address

P.O BOX 924176
 HOMESTEAD FL 33032
 US

916650



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

59-2490526

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

GOODMAN-GUENTHER, JOYCE
10723 SW 104TH ST
MIAMI FL 33176

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

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TITLE	NAME	TITLE	NAME
PD	WARREN, SARA		
14601 COUNTRY WALK DR	MIAMI FL		
VPD	BERNABE, CHICK		
14601 COUNTRY WALK DRIVE	MIAMI FL 33186		
TD	MEACHAM, PATRICIA		
14601 COUNTRY WALK DRIVE	MIAMI FL 33186		
CSD	HESS, JOSEPH		
14601 COUNTRY WALK DR	MIAMI FL 33186		
RSD	OLIVER, LOUISE		
14601 COUNTRY WALK DRIVE	MIAMI FL 33186		
D	SERTELL, CHERYL		
14601 COUTREY WALK DR	MIAMI FL 33186		

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 REQUIRED CHICK BERNABE 1/30/01 V.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)