## 2000 UNIFORM BUSINESS REPORT (UBR) **FILED** DOCUMENT # **N07099** May 16, 2000 8:00 am Secretary of State OLD ENGLEWOOD VILLAGE ASSOCIATION, INC. 05-16-2000 90110 030 \*\*\*\*61.25 Mailing Address Principal Place of Business MCCARTHY, CANDY 411 W DEARBORN SUITE 168 452 W DEARBORN ENGLEWOOD FL 34223 ENGLEWOOD FL 34223-3147 3. Mailing Address Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-2519334 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired. Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MCCARTHY, CANDY 452 W DEARBORN ST ENGLEWOOD FL 34223 Zip Code City 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) Make Check Payable to 9. Election Campaign Financing \$5.00 May Be FILE NOW: Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. OFFICERS AND DIRECTORS 10. ☐ Addition ☐ Delete TITLE TITLE MCCARTHY, CANDY NAME NAME

☐ Addition TITLE ☐ Delete TITLE DIRECTOR NAME YUST, LISA NAME STREET ADDRESS STREET ADDRESS 444 W. DEARBORN ST. CITY-ST-ZIP CITY-ST-ZIP ENGLEWOOD FL Eropident X Addition Delete ☐ Change TITLE AYLOR MEALS NAME NAME Domres, Pam 13 BUCHANS LANDING STREET ADDRESS STREET ADDRESS 1330 AQUA VIEW LANE ENG. FL CITY-ST-ZIP CITY-ST-ZIP ENGLEWOOD FL 34223 Change Change Addition ☐ Delete TITLE ANELING, JOE NAME STREET ADDRESS STREET ADDRESS 300 W. DEARBORN ST. CITY-ST-7IE CITY-ST-ZIP Englewood Fl. Addition TITLE Delete TITLE NAME NAME BOURCIER, JOHN STREET ADDRESS STREET ADDRESS 505 W DEARBORN ST CITY-ST-7IP CITY-ST-ZIP ENGLEWOOD FL 34223 Addition TITLE 🔀 Delete

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-7IP

452 W DEARBORN ST

MCCARTHY, JACK

Englewood Fl

452 W. DEARBORN ST.

**ENGLEWOOD FL 34223** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/00

941-474-8701

Davtime Phone #