

2001. UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 30, 2001 8:00 am
Secretary of State

0078114

03-30-2001 90316 013 *****61.25

DOCUMENT # N16513
 1. Entity Name
FAIRVIEW ESTATES OF CITRUS HILLS PROPERTY OWNERS

Principal Place of Business 2424 N. ESSEX AVENUE HERNANDO FL 34442 US	Mailing Address 2424 N. ESSEX AVENUE HERNANDO FL 34442 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2732310	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent
**COX, ALVAH L., CPA, P.A.
 2424 N. ESSEX AVENUE
 HERNANDO FL 34442**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
State 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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHITNEY, ROBERT 752 E MORNINGSTAR LANE HERNANDO FL 34442	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STOUGHTON, DIANE N ANNAPOLIS AVE HERNANDO FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARPER, JAMES 4357 N INDIANHEAD RD HERNANDO FL 34442	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HANSEN, WAYNE 4252 N LONGVALLEY RD HERNANDO FL 34442	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIGHTELL, FRED 1799 E TRADEWIND DR HERNANDO FL 34442	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, ROBERT 4120 N RINGWOOD CIRCLE HERNANDO FL 34442	<input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VAD BOB MORRIS 4251 N. LITTLE DOVE TERRACE HERNANDO, FL 34442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CHUCK FERGUSON 4061 N. LONGVALLEY ROAD HERNANDO, FL 34442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BARBARA DRAPER 4199 N. LONGVALLEY RD HERNANDO, FL 34442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ERNIE ZELMER 4255 N. INDIAN RIVER DR. HERNANDO, FL 34442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARBARA LANGE 1057 E MORNINGSTAR LANE HERNANDO FL 34442	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ED LEWIS 4161 N. LONGVALLEY ROAD HERNANDO FL 34442	<input type="checkbox"/> Change <input checked="" 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: *Charles Ferguson* **CHARLES FERGUSON** Date **3/27/01** Daytime Phone # **352 341-2276**

CR2E037 (10/00)