2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 17, 2001 8:00 am
Secretary of State
01-17-2001 90064 040 ****61.25

0024159

DOCUMENT # N29209

1. Entity Name

FOX RUN HOMEOWNERS' ASSOCIATION OF TAVARES, INC.

Principal Place of Business	Mailing Address
P O BOX 555 TAVARES FL 32778	P O BOX 555 TAVARES FL 32778

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 59-2678093 ☐ 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
GERKEN, SCOTT A ESQ. 4850 N. HWY. 19A MT. DORA FL 32757	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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

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	PD CISON, TIM 422 PEACE RD TAVARES FL 32778	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MIKE ENDRES 3514 MANATEE RD. TAVARES, FL 32778	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ENDRES, MIKE 35 MANATEE RD TAVARES FL 32778	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD JOANNE SPRING 423 PEACOCK TAVARES, FL 32778	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KNOX, PAM 3024 WEKIVA RD TAVARES FL 32778	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASD LAPINSKI, ETHEL 2413 MANATEE RD TAVARES FL 32778	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ASD APRIL LODEWYCK 2855 MYAKKA RIVER RD. TAVARES, FL 32778	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JACKSON, JACK 432 KING WAY TAVARES FL 32778	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ATD CARLSSON, FRANK 3109 MANATEE RD. TAVARES FL 32778	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ATD JIM ~~STANLEY~~ STALEY 3028 MANATEE RD TAVARES, FL 32778	☐ Change ☑ Addition

CR2E037 (10/00)

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: JACK JACKSON JACK JACKSON 1/8/01 352-343-4414
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #