## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # N30558**

1. Entity Name



## FILED Apr 28, 2003 8:00 am Secretary of State

04-28-2003 90464 044 \*\*\*\*70.00

ANDALUCIA MASTER ASSOCIATION, INC.							
Principal Place of Business 6380 MARBELLA BLVD. APOLLO BEACH FL 33572 US		Mailing Address 6390 MARBELLA BLVD. APOLLO BEACH FL 33572 US					H 61811 1881
2. Principal Place of Business		3. Mailing Address PROPERTY MOT		Men			
Suite, Apt. #, etc.		Suite, Apt. #, etc. 16105 N. FLORIDA, STE, A			CHECK HERE IF MAKING	CHANGES	
City & State		LUTZ FC		4. FEł Number 5	4. FEI Number 59-2942027 Applied For Not Applicable		
Zip	Country	33549	Country	5. Certificate of S		\$8.75 Add Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and Ad	dress of New Registered	Agent	·
BALLARD, MELVIN C II 1422 JUMANA LOOP APOLLO BEACH FL 33572				Street Address (P.O. Box Nymber is Not Acceptable)  Street Address (P.O. Box Nymber is Not Acceptable)  Clow ISE PRIPERTY INSTITUTE  City LUTZ  FL Zip Code 33549			
	named entity submits this clatement folions of registered agent.  Signature, typed or printed name of registered agent.			r registered agent, or both, in			
FILE NOW: FEE IS \$61.25  9. Election Campaigr Trust Fund Contrib			ntribution.	\$5.00 May Be Added to Fees	Make Chec Florida Depar	tment of S	State
10.	OFFICERS AND DIF		11.		GES TO OFFICERS AND DI		
TITLE	PD PDANNON CHICENE	Delete	TITLE	PD	- @ A V	Change	Addition
NAME	Brannon, Eugene 1423 Jumana Loop	•	NAME STREET ADDRESS	BILL ARMS	7760700		
STREET ADDRESS CITY-ST-ZIP	APOLLO BEACH FL 33572		CITY-ST-ZIP		ACH, FL 335	72	6
	VPD	Delete	TITLE	TD	1011, PC 000	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PETRICK, DAN 1421 JUMANA LOOP APOLLO BEACH FL 33572	Delete		TRACY GILL 6447 LAKE APOULD BEA			<b>A</b> (1.001.001)
	TD			VD	TCH-12C OUS.		Addition
TITLE NAME	BALLARD, MEL	☐ Delete	TITLE NAME			Change	
STREET ADDRESS	1422 JUMANA LOOP		STREET ADDRESS		•		
CITY-ST-ZIP	APOLLO BEACH FL 33572		CITY-ST-ZIP				
TITLE	D	☐ Delete	TITLE			☐ Change	☐ Addition
NAME	DYKEMA, VERN		NAME				- }
STREET ADDRESS	1401 ALHAMBRA		STREET ADDRESS				
CITY-ST-ZIP	APOLLO BEACH FL 33572		CITY-ST-ZIP			<b></b>	
TITLE		☐ Delete	TITLE	5 D		☐ Change	Addition
NAME			NAME	LARRY UNG	DERWOOD		
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP	6447 RUBI	4	_	
CITY-\$T-ZIP		—————————————————————————————————————		APOLLO BE	HOH OSST	Change	Addition
TITLE		☐ Delete	TITLE	FRANK OK	141501		Addition
NAME STREET ADDRESS			NAME STREET ADDRESS	1446 Juma	NA LAOP		
CITY-ST-ZIP			CITY-ST-ZIP	APRILA ACA	NA LAOP ACH, IL 33	512	Ì
	I certify that the information supplied with	this filing does not qualify for t	he exemption sta	ated in Section 119.07(3)(i), F	Florida Statutes. I further ce	rtify that the in	nformation

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 within address with all other the empowered.

**SIGNATURE:**