

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N37605

1. Entity Name

CITRUS PARK MOBILE HOME OWNERS ASSOCIATION, INC.

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90104 021 ****61.25



DO NOT WRITE IN THIS SPACE

Principal Place of Business P.O. BOX 366071 BONITA SPRINGS FL 34136	Mailing Address P.O. BOX 366071 BONITA SPRINGS FL 34136
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 65-0240443	Applied For ☐ Not Applicable
Zip	Country	Zip	Country

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

COLLING, LEE JAY
500 NO. MAITLAND AVE
SUITE 203
MAITLAND FL 32751

7. Name and Address of New Registered Agent

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
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WILEY, MERRIT 25609 CITRUS BLOSSOM D BONITA SPRINGS FL 34135	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUSTIN, CHARLES 25811 LILAC CT BONITA SPRINGS FL 34135	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CLAIRE COSGROVE 25990 CEDAR HILL COURT BONITA SPRINGS FL 34135	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BROOKS, MARIE 25735 CARNATION COURT BONITA SPRINGS FL 34135	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, HAROLD 25966 CEDAR HILL CT BONITA SPRINGS FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OLBRICH, CARL 25716 CARNATION CT BONITA SPRINGS FL 34135	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

SD
LISI BEAUDOIN
25603 CITRUS BLOSSOM DR
BONITA SPRINGS, FL 34135

D
AUDREY WALTERS
12500 COMMUNITY DR
BONITA SPRINGS, FL 34135

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: MARIE L. BROOKS **MARIE L. BROOKS** 3/12/02 941-2824
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)