

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 05, 2002 8:00 am
Secretary of State

03-05-2002 90141 006 ****61.25

DOCUMENT # N37842

1. Entity Name

DEVONSHIRE NORTH ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1506 JASPER COURT
 VENICE FL 34292

1506 JASPER COURT
 VENICE FL 34292

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0194394

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CODELLA, FRANK
1552 JASPER CT
VENICE FL 34292

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 **VD** Delete
 NAME **STILES, CLIFF**
 STREET ADDRESS **1536 JASPER CT**
 CITY-ST-ZIP **VENICE FL 34292**

TITLE Change Addition
 NAME **Bruno, Harry**
 STREET ADDRESS **1540 Jasper Court**
 CITY-ST-ZIP

TITLE **TD** Delete
 NAME **DESRAISIERS, ROBERT**
 STREET ADDRESS **1576 JASPER CT**
 CITY-ST-ZIP **VENICE FL 34262**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SD** Delete
 NAME **SCHULTZ, KENNETH**
 STREET ADDRESS **1513 BELFAY DR**
 CITY-ST-ZIP **VENICE FL**

TITLE Change Addition
 NAME **Carmichael, Kenneth**
 STREET ADDRESS **1532 Jasper Court**
 CITY-ST-ZIP **Venice, FL 34292**

TITLE **D** Delete
 NAME **JOHNSON, HERBERT**
 STREET ADDRESS **1558 BEFAL DR**
 CITY-ST-ZIP **VENICE FL**

TITLE Change Addition
 NAME **Swartz, Mariel**
 STREET ADDRESS **1504 Jasper Court**
 CITY-ST-ZIP **Venice, FL 34292**

TITLE **PD** Delete
 NAME **CODELLA, FRANK**
 STREET ADDRESS **1506 JASPER COURT**
 CITY-ST-ZIP **VENICE FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 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.

SIGNATURE: *Robert T. Desrosiers*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert T. Desrosiers

Date: **2/17/02** Daytime Phone #: **941-485-0898**

CR2E037 (9/01)