

2000 UNIFORM BUSINESS REPORT (UBR)

FILED

Feb 07, 2000 8:00 am
Secretary of State

02-07-2000 90024 005 ****61.25

DOCUMENT # N39123

1. Entity Name

CHARLESTON CORNERS PROPERTY OWNERS ASSOCIATION,

Principal Place of Business

C/O GREENACRE PROPERTIES, INC
4131 GUNN HWY
TAMPA FL 33624
US

Mailing Address

4131 GUNN HWY
% VANGUARD MGMT
TAMPA FL 33624-4725
US

00014030



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3080537

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

WEIGEL, ALICIA
GREENACRE PROPERTIES, INC
4131 GUNN HIGHWAY
TAMPA FL 33624

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	VD GLICK, BILLYE D 4131 GUNN HIGHWAY TAMPA FL 33624	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BELMONT, CONNIE 4131 GUNN HIGHWAY TAMPA FL 33624	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RAMER, KIM 4131 GUNN HIGHWAY TAMPA FL 33624	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WALKER, NORM 4131 GUNN HIGHWAY TAMPA FL 33624	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVD WOLFE, JOHN 4131 GUNN HIGHWAY TAMPA FL 33624	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO MELINDA MCKENZIE 4131 GUNN HWY Tampa 33624	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DAWN BIRD 4131 GUNN-HIGHWAY Rd Tampa FL 33624	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DEBRA Pugliese 4131 Gunn Hwy Tampa, FL 33624	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DON LUND 4131 Gunn Hwy Tampa, FL 33624	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JOHN WOLF 4131 GUNN Hwy Tampa, FL 33624	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/28/00