

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 26, 2001 8:00 am
Secretary of State

0067957

DOCUMENT # N39628

1. Entity Name

HAMILTON POINTE HOMEOWNERS ASSOCIATION, INC.

03-26-2001 90035 009 ****61.25

Principal Place of Business

Mailing Address

P O BOX 3096
 WINTER HAVEN FL 33881

P O BOX 3096
 WINTER HAVEN FL 33881

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

59-3113581

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SWAIN REALTY INC.
814 SPRING LAKE SQUARE
P.O. BOX 3096
WINTER HAVEN FL 33885

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: PDD
 NAME: CAREFOOT, GEORGE Delete
 STREET ADDRESS: 313 HAMILTON SHORE DR NE
 CITY-ST-ZIP: WINTER HAVEN FL 33881-5711

TITLE: PDD
 NAME: RICHARD STETTLER Change Addition
 STREET ADDRESS: 204 INVERNESS WAY NE
 CITY-ST-ZIP: WINTER HAVEN, FL 33881

TITLE: VPD
 NAME: CAREFOOT, GEORGE Delete
 STREET ADDRESS: 131 HAMILTON SHORE DRIVE
 CITY-ST-ZIP: WINTER HAVEN FL 33881

TITLE: VPD
 NAME: JERRY BREWER Change Addition
 STREET ADDRESS: 718 HERITAGE DRIVE
 CITY-ST-ZIP: WINTER HAVEN, FL 33881

TITLE: SD
 NAME: RAFOOL, RAY Delete
 STREET ADDRESS: 302 HAMILTON SHORE DRIVE N.E.
 CITY-ST-ZIP: WINTER HAVEN FL 33881

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Delete
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

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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: *Richard Stettler*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: **3-15-01**

Daytime Phone #

CR2E037 (10/00)