

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N42018

1. Entity Name

THE VILLAGES HOMEOWNERS ASSOC., INC. OF THE VILL

FILED
Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90020 025 ****61.25

Principal Place of Business
Savannah Center

Mailing Address

~~LAKELAND CENTER~~
~~AVENUE CENTRAL~~ El Camino Real
LADY LAKES FL 32159
US

BOX 1079
LADY LAKE FL 32158-1079
US

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

59-3050666

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

RICHEY, STEVEN J
920 WEST MAIN ST.
LEESBURG FL 34749

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

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	TOPPING, FRANK H.	
STREET ADDRESS	1506 LAVACA LANE	
CITY-ST-ZIP	LADY LAKE FL	
TITLE	VP President	☐ Delete
NAME	ROSENBLATT, SEYMOUR	
STREET ADDRESS	1205 SAN JUAN DRIVE	
CITY-ST-ZIP	LADY LAKE FL	
TITLE	SD	☒ Delete
NAME	SALTER, ELLIE	
STREET ADDRESS	707 AGUA WAY	
CITY-ST-ZIP	LADY LAKE FL	
TITLE	TD	☐ Delete
NAME	JARVIS, ROSEMARY	
STREET ADDRESS	217 DEL RIO	
CITY-ST-ZIP	LADY LAKE FL	
TITLE	D	☒ Delete
NAME	HICKS, JIMMY	
STREET ADDRESS	668 SAN PEDRO DR.	
CITY-ST-ZIP	LADY LAKE FL	
TITLE	D	☒ Delete
NAME	KEMPER, CLYDE	
STREET ADDRESS	828 RAMOS	
CITY-ST-ZIP	LADY LAKE FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP	☐ Change ☒ Addition
NAME	Chico Mir	
STREET ADDRESS	1701 Madero Dr.	
CITY-ST-ZIP	The Villages, Fl. 32159	
TITLE	Director	☐ Change ☒ Addition
NAME	Dan Semenza	
STREET ADDRESS	1204 LaPaloma Pl.	
CITY-ST-ZIP	The Villages, Fl. 32159	
TITLE	Director	☐ Change ☒ Addition
NAME	Ken Townley	
STREET ADDRESS	1713 Pietro Pl.	
CITY-ST-ZIP	The Villages, Fl. 32150	
TITLE	Director	☐ Change ☒ Addition
NAME	Harry Honan	
STREET ADDRESS	1901 Oviedo Ct.	
CITY-ST-ZIP	The Villages, Fl. 32159	
TITLE	Director	☐ Change ☒ Addition
NAME	Ron Kerschner	
STREET ADDRESS	808 Maple Ln.	
CITY-ST-ZIP	The Villages, Fl. 32159	
TITLE	M.J. Doherty DIRECTOR	☐ Change ☒ Addition
NAME	902 San Saba Ct.	
STREET ADDRESS	The Villages, Fl. 32159	
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: *ROSEMARY JARVIS*
SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-16-00

352-753-6194

Date

Daytime Phone #