2001 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE Foliand

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 06, 2001 8:00 am Secretary of State **DOCUMENT # N50329** 04-06-2001 90057 048 ****61.25 GLEN ABBEY WEST HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 100 CENTURY BLVD 100 CENTURY BLVD WEST PALM BEACH FL 33417 WEST PALM BEACH FL 33417 2. Principal Place of Business 3. Mailing Address 534 S. Pine Meadow Dr. 534 S. Pine Meadow Dr. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State DeBary, Florida City & State 4. FEI Number Applied For 65-0488287 DeBary, Florida Not Applicable Zip , 33417_. Country \$8.75 Additional 33417 5. Certificate of Status Desired . Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Richard Witters Street Address (P.O. Box Number is Not Acceptable) JAIVEN, JACK 534 S. Pine Meadow Drive 100 CENTURY BLVD WEST PALM BEACH FL 33417 Zip Cod 13 DeBary, 8. The above named entity submits this statement to the purpose of changing its registered office or registered agent, or both, in the state of Florida Richard Witters, Director SIGNATURE 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS DP (X) Delete TITLE TITLE Change / Addition Kretschmer, Hans O'NEIL, TIMOTHY J NAME NAME 100 CENTURY BLVD 534 S. Pine Meadow Drive STREET ADDRESS STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33417 CITY-ST-ZIP DeBary, FL 32713 DVST TITLE DV ☐ Change ✓ Naddition TITLE 🔼 Delete JAIVEN, JACK NAME May, Ron STREET ADDRESS 100 CENTURY BLVD STREET ADDRESS 534 S. Pine Meadow Drive CITY: ST: 7IP --WEST PALM BEACH FL 33417 CITY-ST-7IP = DeBary, FL 32713 TITLE TITLE ☐ Change Addition. 🔀 Delete LEVY, H. IRWIN Witters, Richard NAME NAME STREET ADDRESS 100 CENTURY BLVD. STREET ADDRESS 534 S. Pine Meadow Drive CITY-ST-ZIP CITY-ST-ZIP W. PALM BCH. FL DeBary FL 32713 TITLE ☐ Delete Change TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP Delete Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

GUIRERichard Witters, Director