

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000000232

1. Entity Name

THE FRENCH QUARTERS AT TARA HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

7016 CHICKASAW BAYOU  
BRADENTON FL 34203  
US

7016 CHICKASAW BAYOU  
BRADENTON FL 34203  
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

65-0584238

Applied For

Not Applicable

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

RHEINGOLD, MARILYN  
7016 CHICKASAW BAYOU  
BRADENTON FL 34203

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 PD  
NAME KAVIS, JOHN  
STREET ADDRESS 6922 CHICKASAW BAYOU  
CITY-ST-ZIP BRADENTON FL 34203 ☐ Delete

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

TITLE VD  
NAME LEONARD, LUKE  
STREET ADDRESS 7024 CHICKASAW BAYOU  
CITY-ST-ZIP BRADENTON FL 34203 ☒ Delete

TITLE VD  
NAME ROBERT CARROLL  
STREET ADDRESS 6901 CHICKASAW BAYOU  
CITY-ST-ZIP BRADENTON, FL, 34203 ☒ Change ☒ Addition

TITLE TD  
NAME RHEINGOLD, MARILYN  
STREET ADDRESS 7016 CHICKASAW BAYOU  
CITY-ST-ZIP BRADENTON FL 34203 ☐ Delete

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

TITLE D  
NAME MCALEAR, ALLAN  
STREET ADDRESS 7012 CHICKASAW BAYOU  
CITY-ST-ZIP BRADENTON FL 34203 ☐ Delete

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

TITLE SD  
NAME SHUFORD, SALLY  
STREET ADDRESS 7008 CHICKASAW BAYOU  
CITY-ST-ZIP BRADENTON FL 34203 ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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 #

1/4/02 94-727-9174

CR2E037 (9/01)