

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

04-30-2003 90049 030 ****61.25

DOCUMENT # N93000003439

1. Entity Name

PIPKIN VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**PO BOX 5242
LAKELAND FL 33807
US**

Mailing Address

**PO BOX 5242
LAKELAND FL 33807
US**

11027222



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-3203522**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**SWEAT, WILLIAM A JR
2018 SOUTH FLORIDA AVENUE
LAKELAND FL 33806**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	P	☒ Delete
NAME	GARDNER, MILDRED	
STREET ADDRESS	1251 DOSSEYWOOD LANE	
CITY-ST-ZIP	LAKELAND FL 33811	
TITLE	VP	☒ Delete
NAME	HUMPHREY, RICHARD	
STREET ADDRESS	1228 DOSSEYWOOD LN	
CITY-ST-ZIP	LAKELAND FL 33811	
TITLE	S	☐ Delete
NAME	HARRISON-CROWE, HEIDI	
STREET ADDRESS	1152 DOSSEYWOOD LN	
CITY-ST-ZIP	LAKELAND FL 33811	
TITLE	T	☐ Delete
NAME	BRACKMYER, KATHLEEN	
STREET ADDRESS	1163 DOSSEYWOOD LANE	
CITY-ST-ZIP	LAKELAND FL 33811	
TITLE	D	☐ Delete
NAME	IOZZIO, KATHY	
STREET ADDRESS	1242 DOSSEYWOOD LANE	
CITY-ST-ZIP	LAKELAND FL 33811	
TITLE	D	☒ Delete
NAME	KINKEL, SUE	
STREET ADDRESS	1203 DOSSEYWOOD LANE	
CITY-ST-ZIP	LAKELAND FL 33811	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☐ Change ☒ Addition
NAME	RICHARD HUMPHREY	
STREET ADDRESS	1228 DOSSEYWOOD LANE	
CITY-ST-ZIP	LAKELAND FL 33811	
TITLE	VP	☐ Change ☒ Addition
NAME	MARLENE THOMAS	
STREET ADDRESS	4842 DOSSEYWOOD CT.	
CITY-ST-ZIP	LAKELAND FL 33811	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	JAMES MALLOY	
STREET ADDRESS	1229 DOSSEYWOOD LN	
CITY-ST-ZIP	LAKELAND FL 33811	

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:

Kathleen C. Brackmyer, Treas. 4/27/03 863-646-8940

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/02)