

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

FILED
Mar 07, 2003 8:00 am
Secretary of State

03-07-2003 90137 020 ****61.25

DOCUMENT # N94000000256

1. Entity Name
RUXTON VILLAGE II HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**40347 US 19 NORTH
STE 201
TARPON SPRINGS FL 34689**

Mailing Address
**PO BOX 695
TARPON SPRINGS FL 34689**

10033233



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 **59-3232124**
Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**KARAGIANS, IRENE
40347 US 19 NORTH
STE 201
TARPON SPRINGS FL 34689**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
PD STODDARD, DONALD 7619 TOLAR DR NEW PORT RICHEY FL 34654	<input type="checkbox"/>		<input type="checkbox"/>
T ROSS, WILLIAM 7620 TOLAR DR NEW PORT RICHEY FL 34654	<input type="checkbox"/>		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
SD LIEHR, JOHN 7623 TOLAR DRIVE NEW PORT RICHEY FL 34654	<input checked="" type="checkbox"/>	SD STREETER, SHIRLEY 7645 Upton Ct New Port Richey, Fl 34654	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
VP HILL, GEORGE 10701 MILL RIVER DRIVE NEW PORT RICHEY FL 34654	<input checked="" type="checkbox"/>	VP GARNEAU, RICHARD 7532 Roland Court New Port Richey, Fl 34654	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D GARNEAU, RICHARD 7532 ROLAND COURT NEW PORT RICHEY FL 34654	<input type="checkbox"/>	D POPILLO, JOSEPH 7529 Roy Court New Port Richey, Fl 34654	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/>		<input type="checkbox"/> Change <input type="checkbox"/> 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: **Donald Stoddard**

727-942-4755

CR2E037 (10/02)