

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000000269

1. Entity Name

SPANISH TRACE ESTATES HOMEOWNERS' ASSOCIATION, I
NC.

Principal Place of Business

P O BOX 5586
NAVARRE FL 32566
US

Mailing Address

P O BOX 5586
NAVARRE FL 32566
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

59-3259980

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

ETHERIDGE, RAY O
3298 SUMMITT BLVD
SUITE 4
PENSACOLA FL 32503

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 reissuing)

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 NAME STREET ADDRESS CITY-ST-ZIP	DP BARON, PAUL 7065 CALLE PONCE DE LEON NAVARRE FL 32566	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP STEPHEN, JIM 3012 VIA CONQUISTADORES NAVARRE FL 32566	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CRUMP, MARY ELLEN 3049 VIA CONQUISTADORES NAVARRE FL 32566	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD EMEL, JEFF 7032 CALLE CABEZA DE VACA NAVARRE FL 32566	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WEISS, BETTY 7028 CALLE CABEZA DE VACA NAVARRE FL 32566	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PAULZAK, MICHAEL 7084 CALLE DE NARVAEZ NAVARRE FL 32566	☒ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bacon, Paul BACON,	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Mike Finkert 2993 VIA Conquistadores Navarre FL 32566	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO Rocky Hall 7045 Calle De Narvaez Navarre, FL 32566	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/T	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DLINDY AVER 298C VIA CONQUISTADORES NAVARRE, FL 32566	☐ 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 address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4.4.02

Date

850-434-3585

Daytime Phone #

FILED
May 29, 2002 8:00 am
Secretary of State

04-23-2002 90369 019 ****61.25

31546



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)