2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State
05-02-2001 90123 039 ****61.25

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DOCUMENT # N94000001171

1. Entity Name

COVINGTON PARK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
100 PLANTATION BAY DRIVE ORMOND BEACH FL 32174 US	100 PLANTATION BAY DRIVE ORMOND BEACH FL 32174 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
21 Old Kings Road North	P.O. Box 352915
Suite, Apt. #, etc.: Suite B-209	Suite, Apt. #, etc.
City & State: Palm Coast, Florida	City & State: Palm Coast, Florida
Zip: 32137 Country: USA	Zip: 32135 Country: USA

4. FEI Number 59-3290081 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

HAPIUK, NANCY D
100 PLANTATION BAY DRIVE
ORMOND BEACH FL 32174

7. Name and Address of New Registered Agent

Name: MARC BELLAPIANTA
Street Address (P.O. Box Number is Not Acceptable): 21 Old Kings Road North
Suite B-209
City: Palm Coast **FL** Zip Code: 32137

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: _____ MARC BELLAPIANTA 4-27-01
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	DST ARRINGTON, DALE 2359 BEVILLE ROAD DAYTONA BEACH FL 32119	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TUOHEY, WILLIAM J. 14 SENTRY OAK PLACE PALM COAST, FL 32137	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD SMITH, RICHARD S 2359 BEVILLE ROAD DAYTONA BEACH FL 32119	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSD CURTIS, FAITH 2 TWISTED OAK PLACE PALM COAST, FL 32137	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD ROSS, DOUGLAS R JR 2359 BEVILLE ROAD DAYTONA BEACH FL 32119	XX Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PELLETIER, MICHELLE 15 WEBER LANE PALM COAST, FL 32164	☐ Change XX Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: William J. Tuohey WILLIAM J. TUOHEY 4-26-01 (386)445-9282
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #