

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

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90138 047 ****61.25

DOCUMENT # N94000003695

1. Entity Name
POINCIANA RIDGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**2100 SANTA LUCIA CIR.
MELBOURNE FL 32935
US**

Mailing Address
**2100 SANTA LUCIA CIR.
MELBOURNE FL 32935
US**

42000202



2. Principal Place of Business
2099 Santa Lucia Cir
Suite, Apt. #, etc.

3. Mailing Address
2099 Santa Lucia Cir
Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
Melbourne, FL

City & State
Melbourne, FL

Zip
32935

Country
Brevard

Zip
32935

Country
Brevard

4. FEI Number **59-3305055**

Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent
**HAND, LORETTA
2100 SANTA LUCIA CIR.
MELBOURNE FL 32935**

7. Name and Address of New Registered Agent

Name
Andrew Cesar

Street Address (P.O. Box Number is Not Acceptable)
2099 Santa Lucia Cir

City
Melbourne

FL

Zip Code
32935

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 **Wayne C Williams** **Wayne C Williams** **Treasurer** **28 Jan 03**

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	PD	☒ Delete
NAME	HAND, LORETTA	
STREET ADDRESS	2100 SANTA LUCIA CIR	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	DS	☒ Delete
NAME	JENKINS, JANA	
STREET ADDRESS	2123 SANTA LUCIA CIRCLE	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	DT	☒ Delete
NAME	PUGH, SANDRA	
STREET ADDRESS	2106 SANTA LUCIA CIRCLE	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	☐ Change ☒ Addition
NAME	Andrew Cesar	
STREET ADDRESS	2099 Santa Lucia Cir	
CITY-ST-ZIP	Melb, FL 32935	
TITLE	DS	☐ Change ☒ Addition
NAME	Nelson Serrate	
STREET ADDRESS	2110 Santa Lucia Cir	
CITY-ST-ZIP	Melb, FL 32935	
TITLE	DT	☐ Change ☐ Addition
NAME	Wayne Williams	
STREET ADDRESS	2118 Santa Lucia Cir	
CITY-ST-ZIP	Melb, FL 32935	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: **Libby C Williams** **28 Jan 03** **321-254-3094**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (10/02)