

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

<b>DOCUMENT # N95000002514</b> 1. Entity Name <b>DUNMORE HOMEOWNERS' ASSOCIATION, INC.</b>			90123544
Principal Place of Business 2155 DUNMORE LANE VERO BEACH, FL 32963 US		Mailing Address 2155 DUNMORE LANE VERO BEACH, FL 32963 US	
2. Principal Place of Business <b>2175 DUNMORE LN</b> Suite, Apt. #, etc.		3. Mailing Address <b>2175 DUNMORE LN</b> Suite, Apt. #, etc.	
City & State <b>VERO BEACH, FL</b>		City & State <b>VERO BEACH, FL</b>	
Zip <b>32963</b>		Zip <b>32963</b>	
Country <b>US</b>		Country <b>US</b>	
4. FBI Number <b>59-3443467</b>		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$0.75 Additional Fee Required.	
6. Name and Address of Current Registered Agent <b>LOPES, CRAIG L.</b> 2155 DUNMORE LANE VERO BEACH, FL 32963		7. Name and Address of New Registered Agent Name <b>JOHN M. SEROVICH</b> Street Address (P.O. Box Number is Not Acceptable) <b>2175 DUNMORE LN</b> City <b>VERO BEACH</b> FL Zip Code <b>32963</b>	
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 <i>Craig Lopes</i> <b>Craig Lopes</b> <i>John M. Serovich</i> <b>JOHN M. SEROVICH</b> <b>4/28/03</b>			
FILE NOW! FEE IS \$61.25		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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-STATE-ZIP	SD LOPES, CYNTHIA J 2155 DUNMORE LANE VERO BEACH, FL 32963	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	SD SEROVICH, AMY L 2175 DUNMORE LN VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VD JOHNSON, MITCH 2145 DUNMORE LANE VERO BEACH, FL 32963	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VPD WELLES, JAMES 2180 DUNMORE LN VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD JOHNSON, MITCH 2145 DUNMORE LANE VERO BEACH, FL 32963	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	PD SEROVICH, JOHN 2175 DUNMORE LN VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VPD SEROVICH, JOHN 2175 DUNMORE LANE VERO BEACH, FL 32963	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	TDD STEIN, JAMES 2190 DUNMORE LN VERO BEACH, FL 32963
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	<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)(f), 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: <i>John M. Serovich</i> <b>JOHN M. SEROVICH - PRESIDENT</b> <b>4/28/03</b>		Date	

772-234-1959