

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State

03-19-2001 90009 013 ****61.25

DOCUMENT # N95000003177

1. Entity Name

CAMELLIA ACRES HOME OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2506 WOODSVIEW DRIVE
 MARIANNA FL 32446

2506 WOODSVIEW DRIVE
 MARIANNA FL 32446

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

59-3343041

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

DULANEY, DAVID
 2506 WOODSVIEW DRIVE
 MARIANNA FL 32446

Name
ALICE H PENDERGRASS

Street Address (P.O. Box Number is Not Acceptable)
2541 WOODSVIEW DRIVE

City
MARIANNA

FL

Zip Code
32446

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.

Alice H. Pendergrass
ALICE PENDERGRASS, SECRETARY/TREASURER

SIGNATURE

3/15/01

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
D Delete
 NAME
PENDERGRASS, DWAIN
 STREET ADDRESS
2541 WOODSVIEW DR
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
VP Change Addition
 NAME
DOUG JONES
 STREET ADDRESS
2534 WOODSVIEW DRIVE
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
D Delete
 NAME
FRIEDRICH, JOE
 STREET ADDRESS
2554 WOODSVIEW DR
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
P Change Addition
 NAME
FRIEDRICH, JOE
 STREET ADDRESS
2554 WOODSVIEW DRIVE
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
P Delete
 NAME
DULANEY, DAVID
 STREET ADDRESS
2506 WOODSVIEW DRIVE
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
S/T Change Addition
 NAME
ALICE PENDERGRASS
 STREET ADDRESS
2541 WOODSVIEW DRIVE
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
VP Delete
 NAME
KEENE, LONNIE
 STREET ADDRESS
2549 WOODSVIEW DRIVE
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
D Change Addition
 NAME
MARION HAGAN
 STREET ADDRESS
2530 WOODSVIEW DRIVE
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
S Delete
 NAME
SULLIVAN, LINDA
 STREET ADDRESS
2545 WOODSVIEW DRIVE
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
D Change Addition
 NAME
DAVID MCCORMICK
 STREET ADDRESS
2533 WOODSVIEW DRIVE
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
T Delete
 NAME
DULANEY, JANET
 STREET ADDRESS
2506 WOODSVIEW DRIVE
 CITY-ST-ZIP
MARIANNA FL 32446

TITLE
 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(9)(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: *Alice H. Pendergrass* **ALICE H PENDERGRASS**

3/15/01

850-526-7527

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)