

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2002 8:00 am
Secretary of State

0089172

DOCUMENT # N96000004188

1. Entity Name

SIGNATURE ESTATES HOMEOWNERS ASSOCIATION, INC.

04-09-2002 91181 011 ****61.25

Principal Place of Business

Mailing Address

**C/O TODD H HOLDER
 311 SIGNATURE TERRACE
 SAFETY HARBOR FL 34695**

**C/O TODD H HOLDER
 311 SIGNATURE TERRACE
 SAFETY HARBOR FL 34695**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3416741

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**HOLDER, TODD H
 311 SIGNATURE TERRACE
 SAFETY HARBOR FL 34695**

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

3/30/2002

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 **PD** Delete
 NAME **GIORGIONE, VICTORIA**
 STREET ADDRESS **1052 FAWN CT**
 CITY-ST-ZIP **OLDSMAR FL 34677**

TITLE **PD** Change Addition
 NAME **Meredith Chiarelli**
 STREET ADDRESS **305 Signature Terrace**
 CITY-ST-ZIP **Safety Harbor, FL 34695**

TITLE **TD** Delete
 NAME **HOLDER, TODD H**
 STREET ADDRESS **3112 BISHOP DRIVE**
 CITY-ST-ZIP **SAFETY HARBOR FL 34695**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **SD** Delete
 NAME **SCHUMACHER, JANE**
 STREET ADDRESS **2223 MUIRFIELD WAY**
 CITY-ST-ZIP **OLDSMAR FL 34677**

TITLE **SD** Change Addition
 NAME **JANE Schumacher**
 STREET ADDRESS **301 Signature Terrace**
 CITY-ST-ZIP **Safety Harbor, FL 34695**

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 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)(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:

3/30/02 813/223-5011

CR2E037 (9/01)