

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2002 8:00 am
Secretary of State

03-05-2002 90140 046 ****61.25

DOCUMENT # N97000000729

1. Entity Name

THE HILLS OF MOUNT DORA HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

THE HILLS OF MOUNT DORA HOMEOWNERS' ASSO
P.O. BOX 632
SORRENTO FL 32778-0632

THE HILLS OF MOUNT DORA HOMEOWNERS' ASSO
P.O. BOX 632
SORRENTO FL 32778-0632

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

59-3550617

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

DAVIS, ROBERT
32437 SCENIC HILLS DR
MOUNT DORA FL 32757

Name **CROOKER JAMES**

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

32816 SCENIC HILLS DR

City

MOUNT DORA, FL 3

FL

Zip Code

32757

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

JAMES CROOKER, PRESIDENT

2/11/02

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

TITLE	DV	☐ Delete
NAME	CROOKER, JAMES	
STREET ADDRESS	32816 SCENIC HILLS DR	
CITY-ST-ZIP	MOUNT DORA FL 32757	
TITLE	PD	☒ Delete
NAME	DAVIS, ROBERT	
STREET ADDRESS	32437 SCENIC HILLS DRIVE	
CITY-ST-ZIP	MOUNT DORA FL 32757	
TITLE	SD	☒ Delete
NAME	WOOTEN, MICHELLE	
STREET ADDRESS	32300 SCENIC HILLS DR	
CITY-ST-ZIP	MT DORA FL 32757	
TITLE	TD	☐ Delete
NAME	JAMES, MARY LOU	
STREET ADDRESS	32405 SCENIC HILLS DRIVE	
CITY-ST-ZIP	MOUNT DORA FL 32757	
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	PRESIDENT	☒ Change ☐ Addition
NAME	CROOKER, JAMES	
STREET ADDRESS	32816 SCENIC HILLS DR.	
CITY-ST-ZIP	MOUNT DORA, FL 32757	
TITLE	VICE PRESIDENT	☒ Change ☐ Addition
NAME	WOOTEN, MICHELLE	
STREET ADDRESS	32300 SCENIC HILLS DR.	
CITY-ST-ZIP	MOUNT DORA, FL 32757	
TITLE	SECRETARY	☐ Change ☒ Addition
NAME	DEBBIE DE GINNIS	
STREET ADDRESS	32700 SCENIC HILLS DR	
CITY-ST-ZIP	MOUNT DORA, FL 32757	
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)(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:

JAMES CROOKER, PRESIDENT

2/11/02

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)