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

FILED
Jun 02, 2003 8:00 am
Secretary of State
06-02-2003 90198 041 ****61.25

DOCUMENT # N97000003272

1. Entity Name
COUNTRYSIDE NORTH RESIDENTS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
8775 - 20TH STREET #950 VERO BEACH FL 32960	8775 - 20TH STREET #950 VERO BEACH FL 32966 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip: 32966 / Country	Zip / Country

4. FEI Number 65-0849281 ☐ 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
COLLING, LEE J ESQ 500 NORTH MAITLAND AVENUE SUITE 203 MAITLAND FL 32751	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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BREITER, LORRAINE 8775 20TH STREET, #228 VERO BEACH FL 32966	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD GRAHAM, THOMAS 8775 20TH ST #377 VERO BEACH FL 32966	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MCCASLIN, BERNIE 8775 20TH STREET, #912 VERO BEACH FL 32966	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD TOLSON, MARCELLA 8775 20TH ST #496 VERO BEACH FL 32966	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD WIDEMAN, KAY 8775 20TH STREET, #178 VERO BEACH FL 32966	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD PRILLAMAN. BETTY 8775 20TH ST #454 VERO BEACH FL 32966	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ABEL, LARRY 8775 20TH STREET, #10 VERO BEACH FL 32966	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HANDLOVITS, CARL 8775 20TH ST #262 VERO BEACH FL 32966	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MCGEE, BOB 8775 20TH ST STE 310 VERO BEACH FL 32966	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEMONTIGNY, SHIRLEY 8775 20TH ST #114 VERO BEACH FL 32966	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD FORREST, LUELLA 8775 20TH ST STE 310 VERO BEACH FL 32966	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CORBIN, JEAN 8775 20 TH ST #301 VERO BEACH FL 32966	☐ Change ☒ Addition

CR2E037 (10/02)

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: Luella Forrest SIGNATURE REQUIRED LUELLA FORREST, TREASURER 5/28/03 772-5690781