

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000003776

1. Entity Name

MISSION ESTATES HOMEOWNERS ASSOCIATION, INC.

FILED

Mar 28, 2001 8:00 am
Secretary of State

03-28-2001 90225 002 ****61.25

Principal Place of Business

STE. 16, 635 S. ORANGE AVE.
SARASOTA FL 34236

Mailing Address

STE. 16, 635 S. ORANGE AVE.
SARASOTA FL 34236

00038699



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

59-0740825

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

~~RICHARDSON, ROBERT A~~
~~STE. 16, 635 S. ORANGE AVE.~~
~~SARASOTA FL 34236~~

Name Keith Brown

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

635 S. Orange Ave, Suite 16

City

Sarasota

FL

Zip Code

34236

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

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 DP ☒ Delete
NAME RICHARDSON, ROBERT A
STREET ADDRESS STE. 16, 635 S. ORANGE AVE.
CITY-ST-ZIP SARASOTA FL 34236

TITLE DV ☒ Delete
NAME PITTS, H. LAUDEN
STREET ADDRESS 8 SORRENTO DR.
CITY-ST-ZIP OSPREY FL 34229

TITLE DST ☒ Delete
NAME CAITHNESS, MARK
STREET ADDRESS 635 S. ORANGE AVE, STE 16
CITY-ST-ZIP SARASOTA FL 34236

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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 DP ☒ Change ☒ Addition
NAME Keith Brown
STREET ADDRESS 635 S. Orange Suite 16
CITY-ST-ZIP Sarasota FL 34236

TITLE DV ☒ Change ☒ Addition
NAME Robert Martineau
STREET ADDRESS 635 S. Orange Suite 16
CITY-ST-ZIP Sarasota FL 34236

TITLE DST ☒ Change ☒ Addition
NAME Paula Caithness
STREET ADDRESS 635 S. Orange Suite 16
CITY-ST-ZIP Sarasota FL 34236

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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. I am addressed by the title I am empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/24/00

Date

365-9191

Daytime Phone #

CR2E037 (10/00)