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

DOCUMENT # N9900001117

1. Entity Name

EAGLE LAKE TWO HOMEOWNERS ASSOCIATION, INC.



FILED Jan 21, 2003 8:00 am Secretary of State

01-21-2003 90551 018 ****61.25

				I			
Principal Place of Business 1688 W. HIBISCUS BOULEVARD MELBOURNE TL 32901		Mailing Address 1688 W. HIBIBCUS BOULEVARD MELBOURNE N. 32901		2 CD A D A CD C	70013083		
Not applicable PO Box		3. Mailing Address PO Box 0610 Suite, Apt. #, etc.)50		CHECK HERE IF MAKING CHANGES		
City & Cto	·						
-		City & State PalmoBay	•		562110	Applied For Not Applicable	
Zip	Country	Zip 3 2 9 0 6	Country USA	5. Certificate of Statu		75 Additional Required	
	6. Name and Address of Current		Name	7. Name and Addres	s of New Registered Agen		
1688 W.	HUGH M JR. Hibiscus Boulevard RNE FL 32901		Street Ad	Jack K Wyatt dress (P.O. Box Number is Not MT Carmel Ln	Acceptable)		
			City	lbourne		Zip Code 3 2 9 0 1	
1 0. TILE *	FILE NOW: FEE IS \$61.25 OFFICERS AND DI	Trust Fund	ampaign Financing Contribution. 11.	ADDITIONS/CHANGES	Make Check Pa Florida Department	nt of State	
IAME STREET ADDRESS CITY-ST-ZIP	EVANS, ARTHUR F III 1688 W. HIBISCUS BOULEVARD MELBOURNE FL 32901		NAME STREET ADDRESS	Pres, Dir Hala A Awtrey 580 Benton Dr Melbourne FL 3		Shange p Addition	
TITLE NAME STREET ADDRESS CITY=ST-ZIP	D WOOD, GREGORY T 1688 W. HIBISCUS BOULEVARD MELBOURNE FL-32901	Delete	NAME STREET ADDRESS	VP, Dir Robert G Black 4201 Swanna DF Melbourne, FL	·.	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVANS, MICHAEL P 1688 W HIBISCUS BLVD MELBOURNE FL 32901	Delete	TITLE NAME STREET ADDRESS	Sec, Dir Rita Dalessand 4067 MT Carmel Melbourne, FL	lro Ln	Change Addition	
ITLE IAME TREET ADDRESS CITY-ST-ZIP	D JELUS, TIMOTHY C 1688 W. HIBISCUS BLVD. MELBOURNE FL 32901	□ Delete	TITLE NAME STREET ADDRESS	Treas. Dir Jack K Wyatt 3937 MT Carmel Kelbourne, FL	Ln	Change Addition	
TITLE NAME STREET ADDRESS STY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	. L. M. W. H. E. F. H.		Change 🔲 Addition	
ITLE IAME STREET ADDRESS SITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		, 🗆 (change Addition	

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.

GNATURE: TOLK KILDERT STACKER WYATT TRES 1/16/63 321-724-6090