

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000005331

1. Entity Name

EATONVILLE COMMUNITY CORPORATION, INC.

Principal Place of Business

Mailing Address

545 CLARK STREET
EATONVILLE FL 32751
US

P O BOX 941543
MAITLAND FL 32794-1543
US

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

59-3596187

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

NASH, EVELYN
545 CLARK ST
EATONVILLE 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.

SIGNATURE

Evelyn Nash

04-19-02

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DC
NASH, EVELYN
545 CLARK ST
EATONVILLE FL 32751 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DVC
BROWN, THOMAS
109 WASHINGTON AVE
ORLANDO FL 32810 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
NATHIRI, NY
227 E KENNEDY BLVD
EATONVILLE FL 32751 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DT
ZIMMERMAN, DUANE
434 W KENNEDY BLVD
ORLANDO FL 32810 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
CAROLYN ATKINS, T
394 SUNNYVIEW CIRCLE
ORLANDO, FL. 32810 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
JOHNSON-WRIGHT, LOUISE
308 LEMON ST
EATONVILLE FL 32751 ☒ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
DS
WILLIAMS, JAMES
147 LINCOLN AVE
ORLANDO FL 32810 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
WINIFRED MOUNT-S
558 RUFFEL ST.
EATONVILLE, FL. 32751 ☐ 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.

SIGNATURE:

Evelyn Nash REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-19-02

Date

407-599-0945

Daytime Phone #

CR2E037 (9/01)

0067696