

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N02457

1. Entity Name

PINEBROOK TOWNE HOUSE ASSOCIATION, INC.

FILED
Apr 04, 2000 8:00 am
Secretary of State

04-04-2000 90086 026 ****61.25

Principal Place of Business

Mailing Address

7850 ULMERTON ROAD
SUITE 1
LARGO FL 33771
US

7850 ULMERTON ROAD
SUITE 1
LARGO FL 33771-4015
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

59-2478096

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

GROSS, ALAN M ESQ.
ONE PROGRESS PLAZA, SUITE 1210
ST. PETERSBURG FL 33701

Name

Holiday Isles - Robert Babcock

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

7850 Ulmerton Rd. Ste 1

City

Largo, FL 33771

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

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 D ☐ Delete
NAME LONG, CANDI
STREET ADDRESS 7850 ULMERTON RD., STE. 1
CITY-ST-ZIP LARGO FL 33771

TITLE D ☐ Change ☒ Addition
NAME Grassick, Jennifer
STREET ADDRESS 6721-121st Ave. N. #C
CITY-ST-ZIP Largo, FL 33773

TITLE SD ☐ Delete
NAME HOOD, DAVID
STREET ADDRESS 7850 ULMERTON RD., STE. 1
CITY-ST-ZIP LARGO FL 33771

TITLE D ☐ Change ☒ Addition
NAME Grassick, Brian
STREET ADDRESS 6721-121st Ave N. #C
CITY-ST-ZIP Largo, FL 33773

TITLE PD ☐ Delete
NAME GUIDRY, ADRIENE PAVIA
STREET ADDRESS 7850 ULMERTON RD., STE. 1
CITY-ST-ZIP LARGO FL 33771

TITLE D ☐ Change ☒ Addition
NAME Sinn, Klaus
STREET ADDRESS 3151 Coquina Key Dr. S.E.
CITY-ST-ZIP St. Pete, FL 33705

TITLE VD ☐ Delete
NAME JULIAN, GARY
STREET ADDRESS 7850 ULMERTON RD., STE. 1
CITY-ST-ZIP LARGO FL 33771

TITLE D ☐ Change ☒ Addition
NAME McCabe, Emmett
STREET ADDRESS 14829 Seminole Trail
CITY-ST-ZIP Seminole, FL 33776

TITLE TD ☐ Delete
NAME JULIAN, EVE
STREET ADDRESS 7850 ULMERTON RD., STE. 1
CITY-ST-ZIP LARGO FL 33771

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

TITLE D ☒ Delete
NAME BRADSHAW, KELLY
STREET ADDRESS 4501 37TH ST SOUTH
CITY-ST-ZIP ST PETERSBURG FL 33711

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)