

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 754193

1. Entity Name

HARTRIDGE HARBOR OWNERS' ASSOCIATION INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90334 017 ****61.25

Principal Place of Business

Mailing Address

3548 HARBOR CIR
WINTER HAVEN FL 33881
US

P O BOX 481
WINTER HAVEN FL 33882-0481
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3148697

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

7. Name and Address of New Registered Agent

BEAZELL, BARBARA B
3548 HARBOR CIR
WINTER HAVEN FL 33881

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

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 PD ☐ Delete

NAME WESTLAKE, EDWARD
STREET ADDRESS 3549 HARBOR CIRCLE
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE VD ☐ Delete

NAME SNYDER, BEVERLY
STREET ADDRESS 3567 HARBOR CIRCLE
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE STD ☐ Delete

NAME BEAZELL, BARBARA
STREET ADDRESS 3548 HARBOR CIRCLE
CITY-ST-ZIP WINTER HAVEN FL 33881

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 P/D ☒ Change ☐ Addition

NAME Nettleton, Carol
STREET ADDRESS 3559 Harbor Circle
CITY-ST-ZIP Winter Haven, FL 33881

TITLE V/D ☒ Change ☐ Addition

NAME Carrie Griner
STREET ADDRESS 3554 Harbor Circle
CITY-ST-ZIP Winter Haven, FL 33881

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

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: Carol Nettleton, President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/24/00

863/299-6312

Date

Daytime Phone #

CR2E037 (9/99)