

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N22290

1. Entity Name

PIEDMONT PARK HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

2180 W. STATE ROAD 434
SUITE 5000
LONGWOOD FL 32779

Mailing Address

2180 W. STATE ROAD 434
SUITE 5000
LONGWOOD FL 32779

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

59-2866776

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

HART JR., JAMES W.
SENTRY MANAGEMENT, INC.
2180 WEST STATE ROAD 434, SUITE 5000
LONGWOOD FL 32779

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD ☐ Delete
NAME BIRKHEAD, PAT
STREET ADDRESS 1809 WETHAM BLVD
CITY-ST-ZIP APOKA FL 32703

TITLE PD ☐ Change ☒ Addition
NAME HANSEN, RICK
STREET ADDRESS 1917 PIEDMONT PK BLVD
CITY-ST-ZIP APOKA FL 32703

TITLE VP ☒ Delete
NAME DOUGLAS, JIM
STREET ADDRESS 1749 WATERBEACH CT
CITY-ST-ZIP APOKA FL 32703

TITLE TD ☐ Change ☒ Addition
NAME MUNCH, DEBBIE
STREET ADDRESS 2013 PIEDMONT PK BLVD
CITY-ST-ZIP APOKA FL 32703

TITLE PD ☒ Delete
NAME ANATUCCIO, BJ
STREET ADDRESS 2071 PIEDMONT PARK BLVD
CITY-ST-ZIP APOKA FL 32703

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

TITLE TD ☒ Delete
NAME LANFEAR, MARIE
STREET ADDRESS 1880 PIEDMONT PARK BLVD
CITY-ST-ZIP APOKA FL 32703

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

TITLE D ☐ Delete
NAME SMITH, MARIE
STREET ADDRESS 1710 WATERBEACH CT
CITY-ST-ZIP APOKA FL 32703

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

TITLE SD ☒ Delete
NAME BARRETT, SANDY J
STREET ADDRESS 2023 GRASMER DR
CITY-ST-ZIP APOKA FL 32703

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 #

FILED
Apr 02, 2001 8:00 am
Secretary of State

04-02-2001 90317 022 ****61.25

U0030629



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)