

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J63607

1. Entity Name

MOBILE ESTATES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

6741 S. TAMiami TRAIL
SARASOTA FL 34231

Mailing Address

6741 S. TAMiami TRAIL
SARASOTA FL 34231

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 59-2798064

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

STEPHEN H. KURVIN, ESQ.
7 SOUTH LIME AVENUE
SARASOTA FL 34237

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

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	PRIB, LOUISE	
STREET ADDRESS	2093 GLENWOOD DR.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BURGESS, DON	
STREET ADDRESS	2080 TROTWOOD DR.	
CITY-ST-ZIP	SARASOTA FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	HODGSON, JOHN	
STREET ADDRESS	2107 TROTWOOD DR.	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE	D	<input type="checkbox"/> Delete
NAME	WESTON, MARJORIE	
STREET ADDRESS	2077 DETROITER STREET	
CITY-ST-ZIP	SARASOTA FL 34231	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	HOCHMUTH, FRANCIS	
STREET ADDRESS	2081 DETROITER ST	
CITY-ST-ZIP	SARASOTA FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	LEDoux, JACK	
STREET ADDRESS	2063 N MOBILE ESTATES DR	
CITY-ST-ZIP	SARASOTA FL	

TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ritchie Callahan	
STREET ADDRESS	2074 N. Mobile Estates Dr	
CITY-ST-ZIP	Sarasota, FL	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Maudie MacPherson.	
STREET ADDRESS	2049 Champion	
CITY-ST-ZIP	Sarasota FL	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Al Burpee	
STREET ADDRESS	2090 Detroit St.	
CITY-ST-ZIP	Sarasota, FL	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Gordon Burton	
STREET ADDRESS	2043 N. Mobile Estates Dr.	
CITY-ST-ZIP	Sarasota, FL	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ralph Rigg	
STREET ADDRESS	2059 Sun Home St.	
CITY-ST-ZIP	Sarasota FL	
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jack LeDoux	
STREET ADDRESS	2063 N Mobile Estates Dr.	
CITY-ST-ZIP	Sarasota FL	

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Louise E. Prib

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/01

Date

(941) 925-2078

Daytime Phone #

FILED
Apr 05, 2001 8:00 am
Secretary of State

04-05-2001 90433 011 ***150.00

C0042390



DO NOT WRITE IN THIS SPACE

CR2E034 (10/00)

Attachment Doc # J63607
C0042390

Additional Director:

D

Joseph Tiffany
2070 Sun Home St.
Sarasota, FL