

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 17, 2001 8:00 am
Secretary of State

0025743

DOCUMENT # N35507

1. Entity Name

CHICKASAW TRAILS HOMEOWNERS ASSOCIATION, INC.

04-17-2001 90028 018 ****61.25

Principal Place of Business

Mailing Address

52 E. SOUTH ST.
 ORLANDO FL 32801
 US

52 E. SOUTH ST.
 ORLANDO FL 32801
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2994534

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

DON ASHER & ASSOCIATES, INC.
52 E. SOUTH ST.
ORLANDO FL 32801

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
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
PD
GUINN, JOHN
3866 RUNNING WATER DR
ORLANDO FL 32829

☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
MONTEFORT, JOAN
4112 EAGLE FEATHER DR
ORLANDO FL 32829

☐ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VD
BECK, AUGUSTINE T
3715 PEACE PIPE
ORLANDO FL 32829

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TD **BECK, AUGUSTINE T.** ☒ Change ☐ Addition
3715 PEACE PIPE DRIVE
ORLANDO, FL 32829

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
TD
BARTON, JEFFRY
4147 EAGLE FEATHER DR
ORLANDO FL 32829

☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D **BARTON, JEFFRY** ☒ Change ☐ Addition
4147 EAGLE FEATHER DRIVE
ORLANDO, FL 32829

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
D
WHISSEL, MICHAEL
3722 RUNNING WATER DR
ORLANDO FL 32829

☒ Delete

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

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
VD **TOM, DANIEL** ☐ Change ☒ Addition
8621 RUNNING BEAR DRIVE
ORLANDO, FL 32829

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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/12/01 407835-3395

CR2E037 (10/00)