

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 719368

1. Entity Name

SEMINOLE-ON-THE-GREEN, CAVALIER BUILDING ONE ASSOCIATION, INC.

Principal Place of Business

8950 PARK BOULEVARD
APT 110
SEMINOLE FL 33777
US

Mailing Address

8950 PARK BOULEVARD
APT 110
SEMINOLE FL 33777
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1674716

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

KRUPA, TOM
8950 PARK BLVD #305
SEMINOLE FL 33777

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 PD
NAME BERNARD, PHIL
STREET ADDRESS 8950 PARK BLVD #103
CITY-ST-ZIP SEMINOLE FL 33777 ☐ Delete

TITLE D
NAME ☒ Change ☐ Addition

TITLE ST
NAME KRUPA, TOM
STREET ADDRESS 8950 PARK BLVD #305
CITY-ST-ZIP SEMINOLE FL 33777-4122 ☐ Delete

TITLE PD
NAME JO ANN DAGG
STREET ADDRESS 8950 PARK BLVD #305
CITY-ST-ZIP SEMINOLE, FL 33777-4122 ☐ Change ☒ Addition

TITLE D
NAME LEWIS, RICHARD
STREET ADDRESS 8950 PARK BLVD #105
CITY-ST-ZIP SEMINOLE FL 33777 ☐ Delete

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

TITLE D
NAME ZIMMERMAN, LEONARD
STREET ADDRESS 8950 PARK BLVD #608
CITY-ST-ZIP SEMINOLE FL ☐ Delete

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

TITLE D
NAME NAVARRE, FRED
STREET ADDRESS 8950 PARK BLVD #505
CITY-ST-ZIP SEMINOLE FL ☐ Delete

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

TITLE D
NAME ROBEY, ROBERT
STREET ADDRESS 8950 PARK BLVD #201
CITY-ST-ZIP SEMINOLE FL 33777 ☐ Delete

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

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: TOM KRUPA REQ TOM KRUPA ST 1/8/2002 727-393-5573
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)