

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N16263

1. Entity Name

SUTTON COURT HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O INFINITI PROPERTY MANAGEMENT, INC.  
1301 SEMINOLE BLVD. STE. 110  
LARGO FL 33770  
US

C/O INFINITI PROPERTY MANAGEMENT, INC.  
1301 SEMINOLE BLVD. STE. 110  
LARGO FL 33770  
US

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

59-2775237

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

INFINITI PROPERTY MANAGEMENT INC.  
1301 SEMINOLE BLVD.  
SUITE 110  
LARGO FL 33770

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 ☐ Delete  
NAME HOLTMEYER, RICHARD  
STREET ADDRESS 3691 RIDGEMONT CT  
CITY-ST-ZIP PALM HARBOR FL 34684

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

TITLE VD ☒ Delete  
NAME TOBIASSEN, ELEANOR  
STREET ADDRESS 1324 PHEASANT CREEK DR  
CITY-ST-ZIP PALM HARBOR FL 34684

TITLE V/D ☐ Change ☒ Addition  
NAME ESMON, LUCILLE  
STREET ADDRESS 1371 PHEASANT CREEK DRIVE  
CITY-ST-ZIP PALM HARBOR, FL 34684

TITLE SD ☐ Delete  
NAME VOGLER, FRANK  
STREET ADDRESS 3675 OVERLOOK CT  
CITY-ST-ZIP PALM HARBOR FL

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

TITLE TD ☐ Delete  
NAME CARLSON, MARJORIE  
STREET ADDRESS 3679 CRESTWOOD DR  
CITY-ST-ZIP PALM HARBOR FL 34684

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

TITLE D ☒ Delete  
NAME KUHN, ANNA MAE  
STREET ADDRESS 1349 PHEASANT CREEK DR  
CITY-ST-ZIP PALM HARBOR FL 34684

TITLE D ☐ Change ☒ Addition  
NAME HESTERMAN, MARY  
STREET ADDRESS 1473 PHEASANT CREEK DRIVE  
CITY-ST-ZIP PALM HARBOR, FL 34684

TITLE ☐ Delete  
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:

*Richard Holtmeyer*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-8-02 (727) 785-6081  
Date Daytime Phone #

FILED  
Feb 28, 2002 8:00 am  
Secretary of State

02-28-2002 90009 013 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)