

2002 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N02457**

1. Entity Name

PINEBROOK TOWNE HOUSE ASSOCIATION, INC.**FILED****Mar 06, 2002 8:00 am**
Secretary of State

03-06-2002 90123 019 ****61.25

Principal Place of Business

Mailing Address

**7850 ULMERTON ROAD
SUITE 1
LARGO FL 33771
US****7850 ULMERTON ROAD
SUITE 1
LARGO FL 33771
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2478096

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

**HOLIDAY ISLES ROBERT BABCOCK
1850 ULMERTON ROAD SUITE 1
LARGO FL 33771**

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 \$61.259. 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
**D
JAHREN, JERRY
17715 GULF BLVD #911
SAINT PETERSBURG FL 33708** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
MAURIELLO, ZOE
8323 42ND AVENUE N
SAINT PETERSBURG FL 33709** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
Bannon, Kristen
6600-121st Ave N #5
Largo, FL 33773** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
GUIDRY, ADRIENE
7850 ULMERTON RD., STE. 1
LARGO FL 33771** ☒ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
Major, Albert
6600-121st Ave N # F
Largo, FL 33773** ☐ Change ☒ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
JULIAN, GARY
7850 ULMERTON RD., STE. 1
LARGO FL 33771** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
JULIAN, EVE
7850 ULMERTON RD., STE. 1
LARGO FL 33771** ☐ DeleteTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
STEVENSON, MATT
6200 121ST AVENUE N #2
LARGO FL 33773** ☐ DeleteTITLE
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:

SIGNATURE REQUIRED**2/11/02****727-462-5504**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)