

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000001108

1. Entity Name

WOODBURY GLEN HOMEOWNER'S ASSOCIATION, INC.

FILED

Apr 16, 2002 8:00 am  
Secretary of State

04-16-2002 90158 043 \*\*\*\*61.25

Principal Place of Business

Mailing Address

190 NORTH WESTMONTE DRIVE  
SUITE 100  
ALTAMONTE SPRINGS FL 32714  
US

190 NORTH WESTMONTE DRIVE  
SUITE 100  
ALTAMONTE SPRINGS FL 32714  
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

59-3256423

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

CAMPBELL, MARILYN  
190 NORTH WESTMONTE DRIVE  
SUITE 100  
ALTAMONTE SPRINGS FL 32714

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 RICE, DAVID ☐ Delete  
STREET ADDRESS 12809 WOODBURY GLEN DR  
CITY-ST-ZIP ORLANDO FL 32828

TITLE P ☒ Change ☐ Addition  
NAME Hesterly, Hal  
STREET ADDRESS 12827 Woodbury Glen Dr.  
CITY-ST-ZIP Orlando, FL 32828

TITLE D ☒ Delete  
NAME LINARES, DAWN  
STREET ADDRESS 12732 WOODBURY GLEN DR  
CITY-ST-ZIP ORLANDO FL 32828

TITLE V ☐ Change ☒ Addition  
NAME ELSON, JOYCE  
STREET ADDRESS 12814 Woodbury Glen Dr.  
CITY-ST-ZIP Orlando, FL 32828

TITLE D ☒ Delete  
NAME LENZ, LARRY  
STREET ADDRESS 12730 WOODBURY GLEN DR  
CITY-ST-ZIP ORLANDO FL 32828

TITLE ST ☒ Change ☐ Addition  
NAME RICE, DAVID  
STREET ADDRESS 12809 Woodbury Glen Dr.  
CITY-ST-ZIP Orlando, FL 32828

TITLE D ☐ Delete  
NAME HESTERLY, HAL  
STREET ADDRESS 12827 WOODBURY GLEN DR  
CITY-ST-ZIP ORLANDO FL 32828

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

TITLE D ☒ Delete  
NAME SMILL, BOB  
STREET ADDRESS 12744 WOODBURY GLEN DR  
CITY-ST-ZIP ORLANDO FL 32828

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

TITLE D ☒ Delete  
NAME BROWN, ERIC  
STREET ADDRESS 12755 WOODBURY GLEN DR  
CITY-ST-ZIP ORLANDO FL 32828

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)