

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000001141

1. Entity Name

VINELAND OAKS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

8130 VINELAND OAKS BLVD
ORLANDO FL 32835
US

8118 VINELAND OAKS BLVD
ORLANDO FL 32835
US

2. Principal Place of Business

3. Mailing Address

8202 VINELAND OAKS BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

ORLANDO, FL

Zip

Country

Zip
32835

Country

USA

4. FEI Number

59-3179987

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

HOOVER, VIRGINIA D
8118 VINELAND OAKS BLVD
ORLANDO FL 32835

Name MIKE WYRE

Street Address (P.O. Box Number is Not Acceptable)

8202 VINELAND OAKS BLVD

City ORLANDO

FL

Zip Code
32835

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, 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 D ☐ Delete
NAME LORENZ, RAYMOND
STREET ADDRESS 8130 VINELAND OAKS BLVD
CITY-ST-ZIP ORLANDO FL 32835

TITLE D ☐ Change ☒ Addition
NAME BRIAN HIXON
STREET ADDRESS 8209 VINELAND OAKS BLVD
CITY-ST-ZIP ORLANDO, FL 32835

TITLE D ☒ Delete
NAME KLENK, PHILLIP
STREET ADDRESS 8112 VINELAND OAKS BLVD
CITY-ST-ZIP ORLANDO FL 32835

TITLE D ☐ Change ☒ Addition
NAME CHRISTA HIXON
STREET ADDRESS 8209 VINELAND OAK BLVD
CITY-ST-ZIP ORLANDO, FL 32835

TITLE D ☐ Delete
NAME WYRE, MIKE
STREET ADDRESS 8202 VINELAND OAKS BLVD
CITY-ST-ZIP ORLANDO FL 32835

TITLE D ☐ Change ☒ Addition
NAME ROBERT MILLER
STREET ADDRESS 8131 VINELAND OAKS BLVD
CITY-ST-ZIP ORLANDO, FL 32835

TITLE D ☒ Delete
NAME HOOVER, VIRGINIA
STREET ADDRESS 8118 VINELAND OAKS BLVD
CITY-ST-ZIP ORLANDO FL 32835

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

TITLE D ☒ Delete
NAME YARBROUGH, WILLIE
STREET ADDRESS 8221 VINELAND OAKS BLVD
CITY-ST-ZIP ORLANDO FL 32835

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

839587



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)