

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 31, 2003 8:00 am**  
**Secretary of State**

01-31-2003 90385 045 \*\*\*\*61.25

**DOCUMENT # 750222**

1. Entity Name

**THE QUEENSWOOD ASSOCIATION, INC.**



Principal Place of Business

**5001 GRANADA BLVD  
SEBRING FL 33872**

Mailing Address

**5001 GRANADA BLVD  
SEBRING FL 33872**

2. Principal Place of Business

**5005 GRANADA BLVD**

Suite, Apt. #, etc.

3. Mailing Address

**5005 GRANADA BLVD**

Suite, Apt. #, etc.



☒ CHECK HERE IF MAKING CHANGES

City & State

**SEBRING FL**

Zip  
**33872**

Country

City & State

**SEBRING FL**

Zip  
**33872**

Country

4. FEI Number **59-2873995**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**MCGUIRE, JEAN R  
5001 GRANADA BLVD  
SEBRING FL 33872**

7. Name and Address of New Registered Agent

Name

**HOGAN, BRIAN**

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

**5005 GRANADA BLVD**

City

**SEBRING**

**FL**

Zip Code

**33872**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

**BRIAN HOGAN**

*Brian Hogan*

**Jan. 27, 2003**

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:  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOGAN, BRIAN 5005 GRANDE BLVD SEBRING FL 33872	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MCGUIRE, JEAN R 5001 GRANADA BLVD SEBRING FL 33872	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROBERT, MCELWEE 3817 NE LAKE SEBRING DRIVE SEBRING FL 33870	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HOGAN, BRIAN 5005 GRANADA BLVD SEBRING FL 33872	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCGUIRE, JEAN R 5001 GRANADA BLVD SEBRING FL 33872	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MCELWEE, ROBERT 3817 N.E. LAKE SEBRING DRIVE SEBRING FL 33870	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KENDALL, VICTOR 5007 GRANADA BLVD SEBRING FL 33872	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD GRIMM, KENNETH 5003 GRANADA BLVD. SEBRING FL 33872	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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:

*Brian Hogan* **BRIAN HOGAN**

**Jan. 27, 2003 (863) 471-6295**

CR2E037 (10/02)