

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N10469

FILED  
Apr 22, 2003  
Secretary of State

Entity Name: EASTBROOK HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

% STERLING MANAGEMENT, INC.  
2880 SCHERER DR., SUITE 840  
ST. PETERSBURG, FL 33716

**New Principal Place of Business:**

**Current Mailing Address:**

% STERLING MANAGEMENT, INC.  
2880 SCHERER DR., SUITE 840  
ST. PETERSBURG, FL 33716

**New Mailing Address:**

FEI Number: 59-2653337      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

COTTERILL, RON  
1505 NORTH FLORIDA AVENUE E  
TAMPA, FL 33602      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: SCHIRMER, CRAIG  
Address: 14929 REDCLIFF DR  
City-St-Zip: TAMPA, FL 336251957

Title: SD (X) Delete  
Name: CLAWSON, BILL  
Address: 14916 REDCLIFF DR.  
City-St-Zip: TAMPA, FL 336251957

Title: VD ( ) Delete  
Name: SEGAL, MAL  
Address: 14920 BERELEY DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: TD ( ) Delete  
Name: HOWELL, DIANE  
Address: 14910 GREELEY DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: VD ( ) Delete  
Name: BARUCH, RON  
Address: 15008 REDCLIFF DR.  
City-St-Zip: TAMPA, FL 336251957

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: HOWELL, DIANE  
Address: 14910 GREELEY DRIVE  
City-St-Zip: TAMPA, FL 33625

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG SCHIRMER

PD

04/22/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date