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

DOCUMENT # 703413

1. Entity Name

SEBRING HILLS ASSOCIATION, INC.



FILED Mar 03, 2003 8:00 am § Secretary of State 03-03-2003 90865 012 ****61.25

Principal Place of Business 200 LARK AVE. SEBRING FL 33872		Mailing Address 200 LARK AVE. SEBRING FL 33872			FOREMON				
2 Principal F	Plane of Punisage	3. Mailing Address	ř						
2. Principal Place of Business		3. Walling Address				188 (198 6190) (1 88 (198 910) (ION BION TIME ON		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59-1004946 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						
ABDALLA, GARY			Name						
	RROW AVE	in the second of	Street Address (F			P.O. Box Number is Not Acceptable)			
SEBRING FL 33872					•				
4			City			FI	Zip Cod	e • .	
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									
OKINATORE :	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signa	ature required v	when reinstating)	DATE			
7.	<u> </u>				ſ				
FILE NOW: FEE IS \$61.25 9. Election Camp					\$5.00 May Be	Make Chec			
		Trust Fund Co	ontribution.	LJ ,	Added to Fees	Florida Depa	rtment of S	State	
10.	OFFICERS AND DIR	ECTORS	11.	Al	DDITIONS/CHANGE	S TO OFFICERS AND D	IRECTORS IN	10	
TITLE	P	Delete	TITLE	PRE	SIDENT BY A.G. AU ROBIN A	# D	Change	Addition	
NAME STREET ADDRESS	DEMERI, CY 221 RAIL AVE		NAME CYREET AGDRESS	MAR	COBUNA O	/ (_			
CITY-ST-ZIP	SEBRING FL 33872		STREET ADDRESS CITY-ST-ZIP	1//3	RRAIS E	/ 22077 - 2	2524		
TITLE	VP -	Ø Delete	TITLE	11110	PRESIDENT	<u> </u>	Change	☐ Addition	
NAME	MEZZA, PETE	i Delete	NAME	100	is HARALI	cke.	LAX Orianiya	Addition	
STREET ADDRESS	233 SWALLOW AVE		STREET ADDRESS	307	SWALLO	W 147 C			
CITY-ST-ZIP	SEBRING FL 33872		CITY-ST-ZIP	Sel	BRING, FL	. 33872			
TITLE	SPURRIER, MARY J	☐ Delete	TITLE	Sec		٤.	🕦 Change	☐ Addition	
NAME STREET ADDRESS	239 QUAIL AVE		STREET ADDRESS	PRUT	H DAVIS	ر در در مصور در د	=		
CITY-ST-ZIP	SEBRING FL 33872		CITY-ST-ZIP	Sel	BRING, FL	33972		, i	
TITLE	Τ	☐ Delete	TITLE	Dia	+LTOR		☐ Change	Addition	
NAME	ABDALLA, GARY		NAME	JOY	LE HOEN!	cke.	_	_	
STREET ADDRESS : CITY-ST-ZIP	223 SPARROW AVE	•	STREET ADDRESS	307	T SWALLOW	7007			
	SEBRING FL 33872		CITY-ST-ZIP		BRING,FL. Rector	338/2			
TITLE Name	FREDERICK, FINN	☐ Delete	TITLE NAME	Pot	TA MEZZI	A	☐ Change	Addition	
STREET ADDRESS	308 QUAIL AVE		STREET ADDRESS	23	3 SWALL	on Are		ł	
CITY-ST-ZIP	SEBRING FL		CITY-ST-ZIP	Sec	BRING, FL				
TITLE	D	Delete	TITLE	Der	RLTOR.		☐ Change	Addition	
NAME	HAYMAKER, DEAN		NAME	HRT	DOVE AV	ے			
STREET ADDRESS CITY-ST-ZIP	4035 S. EGRET ST SEBRING FL 33872		STREET ADDRESS CITY-ST-ZIP	CAR	RINS, FL 3	23972			
	OLDRING FL 330/2		0111 01-EII	17010	Croy, I L	JJU - L.			

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: