

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 06, 2001 8:00 am
Secretary of State

04-06-2001 90055 020 ****70.00

DOCUMENT # 709487

1. Entity Name

BREEZEWOOD PARK-ORANGE CITY HILLS CIVIC ASSOCIAT

Principal Place of Business

C/O JOHNSTON, ALICE. S
670 BISCAYNE DR
ORANGE CITY FL 32763
US

Mailing Address

C/O JOHNSTON, ALICE. S
670 BISCAYNE DR
ORANGE CITY FL 32763-7704
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

74-1870948

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

ABELES, DAVID E., PA
#5 WEST HIGHBANKS RD.
DEBARY FL 32713

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 D ☒ Delete
NAME JOHNSTON, ALICE S
STREET ADDRESS 670 BISCAYNE DR
CITY-ST-ZIP ORANGE CITY, FL 0

TITLE ☒ Change ☐ Addition
NAME Walter Deluca P/D
STREET ADDRESS 630 Grand Plaza Drive
CITY-ST-ZIP Orange City, FL 32763

TITLE D ☒ Delete
NAME COWDEN, NORMA
STREET ADDRESS 615 PARKVIEW AVENUE
CITY-ST-ZIP ORANGE CITY FL 32763

TITLE ☒ Change ☐ Addition
NAME John Cardoza V.P/D
STREET ADDRESS 700 E. Roberts Street
CITY-ST-ZIP Orange City, FL 32763

TITLE S ☒ Delete
NAME SOUSA, DELORES
STREET ADDRESS 2235 SE FIRST ST.
CITY-ST-ZIP ORANGE CITY FL

TITLE ☒ Change ☐ Addition
NAME Hope Gilbert S/D
STREET ADDRESS 410 Pine Tree Circle Drive
CITY-ST-ZIP Orange City, FL 32763

TITLE CS ☒ Delete
NAME SEIB, PEGGY
STREET ADDRESS 2245 HILLSIDE AVE
CITY-ST-ZIP ORANGE CITY FL 32763

TITLE ☒ Change ☐ Addition
NAME Alice S. Johnston D
STREET ADDRESS 670 Biscayne Dr.
CITY-ST-ZIP Orange City, FL 32763

TITLE D ☐ Delete
NAME ARTHUR, BROSKA
STREET ADDRESS 2255 SE FIRST ST
CITY-ST-ZIP ORANGE CITY FL

TITLE ☒ Change ☐ Addition
NAME George Freeman TD
STREET ADDRESS 710 Grand Plaza Drive
CITY-ST-ZIP Orange City, FL 32763

TITLE D ☐ Delete
NAME SOUSA, DELORES
STREET ADDRESS 2235 SE FIRST ST
CITY-ST-ZIP ORANGE CITY FL

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: *Alice S. Johnston* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/3/01
Date Daytime Phone #

CR2E037 (10/00)