

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

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90128 025 *****61.25

DOCUMENT # 713398

1. Entity Name

SEBRING COUNTRY ESTATES CIVIC ASSOCIATION, INC.



Principal Place of Business

**3240 GRAND PRIX DRIVE
SEBRING FL 33872**

Mailing Address

**3240 GRAND PRIX DRIVE
SEBRING FL 33872**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-6206111**

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

**LEWIS, SUSAN B
1503 CORVETTE AVE
SEBRING FL 33872**

Name

Dray, Ruth E.

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

3403 Aston Martin Drive

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 *Ruth Ellen Dray*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/29/03
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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Delete
NAME	SUTFIN, JUANITA	
STREET ADDRESS	3012 PARKWOOD ROAD	
CITY-ST-ZIP	SEBRING FL 33872	
TITLE	VP	<input type="checkbox"/> Delete
NAME	HOSKINSON, ANN	
STREET ADDRESS	1623 BENZ TERRACE	
CITY-ST-ZIP	SEBRING FL 33872	
TITLE	T	<input type="checkbox"/> Delete
NAME	PLATTNER, DOROTHY	
STREET ADDRESS	3411 ASTON MARTIN	
CITY-ST-ZIP	SEBRIDGE FL 33872	
TITLE	T	<input type="checkbox"/> Delete
NAME	RIVERA, SAM	
STREET ADDRESS	1312 CORVETTE AVE	
CITY-ST-ZIP	SEBRING FL 33872	
TITLE	T	<input type="checkbox"/> Delete
NAME	TAUAREZ, FELIX	
STREET ADDRESS	1002 CERVETTE AVENUE	
CITY-ST-ZIP	SEBRING FL 33872	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	RIVIERA, JUAN	
STREET ADDRESS	3312 GRAND PRIX DRIVE	
CITY-ST-ZIP	SEBRING FL 33872	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Robert Hilbert	
STREET ADDRESS	1407 Corvete Avenue	
CITY-ST-ZIP	Sebring, FL 33872	

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: *Ruth Ellen Dray* **SIGNATURE REQUIRED**

863-386-1907

CR2E037 (10/02)