

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 714720

1. Entity Name

DOMMERICH BEACH AND CIVIC ASSOCIATION, INC. ✓

FILED
Jul 24, 2000 8:00 am
Secretary of State

07-24-2000 90016 031 ****61.25

Principal Place of Business

P O BOX 940722
MAITLAND FL 32794-7722

Mailing Address

P O BOX 940722
MAITLAND FL 32794-7722

2. Principal Place of Business

Community Homes
Suite, Apt. #, etc.

3. Mailing Address

PO Box 940722
Suite, Apt. #, etc.

City & State

City & State
Maitland FL

4. FEI Number

52-0895956

Applied For

Not Applicable

Zip

Country

Zip
32751

Country
USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BEUMER, STEVEN L
581 ARAPAHO TR.
MAITLAND FL 32751

7. Name and Address of New Registered Agent

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

1655 Algonquin Trl
City Maitland FL Zip Code 32751

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

Michelle K. Morse
Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/11/00
DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

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

TITLE PD
NAME DEWAHL, LAEL ☐ Delete
STREET ADDRESS 541 DOMMERICH DR
CITY-ST-ZIP MAITLAND FL 32751

TITLE VPD
NAME ROBBINS, JEFF ☒ Delete
STREET ADDRESS 1751 CHOCTAW TR
CITY-ST-ZIP MAITLAND FL

TITLE TD
NAME BEUMER, STEVEN L ☒ Delete
STREET ADDRESS 581 ARAPAHO TR.
CITY-ST-ZIP MAITLAND FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ☐ Change ☒ Addition
NAME Michelle Morse
STREET ADDRESS 1655 Algonquin Trl
CITY-ST-ZIP Maitland FL 32751

TITLE Board ☒ Change ☐ Addition
NAME Lael DeWahl
STREET ADDRESS 541 Dommerich Dr
CITY-ST-ZIP Maitland FL 32751

TITLE Vice Pres. ☐ Change ☒ Addition
NAME Lisa DeRao
STREET ADDRESS 909 Mojave Trl
CITY-ST-ZIP Maitland, FL 32751

TITLE Treas. ☐ Change ☒ Addition
NAME Debra Deery
STREET ADDRESS 1851 Mohican Trl
CITY-ST-ZIP Maitland, FL 32751

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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)(l), 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:

Michelle K. Morse
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/11/00
Date

407-975-0267
Daytime Phone #

CR 11-0317 (5/00)