

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 05, 2000 8:00 am
Secretary of State

04-05-2000 90081 029 ****61.25

DOCUMENT # 718818

1. Entity Name

HOLIDAY GARDENS CIVIC ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2140 PAMELA DR
HOLIDAY FL 34690
US

2140 PAMELA DR
HOLIDAY FL 34690-4449
US

2. Principal Place of Business

5131 VICTORIA LN

3. Mailing Address

5131 VICTORIA LN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HOLIDAY FL

City & State

HOLIDAY FL

Zip

34690

Country

PASCO

Zip

34690

Country

PASCO

4. FEI Number

59-2875204

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

CARLSON, BEA
5131 VICTORIA LANE
HOLIDAY FL 34690

Name

BEA CARLSON

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

5131 VICTORIA LN

City

HOLIDAY

FL

Zip Code

34690

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

Beatrice C. Carlson

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 ☐ Delete
NAME P
STREET ADDRESS CARLSON, BEA
CITY-ST-ZIP 5131 VICTORIA LN
HOLIDAY FL 34690

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

TITLE ☐ Delete
NAME D
STREET ADDRESS CARLSON, HARRY
CITY-ST-ZIP 5238 NANCY LANE
HOLIDAY FL 34690

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

TITLE ☐ Delete
NAME T
STREET ADDRESS COLEMAN, JIM
CITY-ST-ZIP 5034 VICTORIA LANE
HOLIDAY FL 34690

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

TITLE ☐ Delete
NAME VP
STREET ADDRESS WELSH, MARION
CITY-ST-ZIP 5238 NANCY LANE
HOLIDAY FL 34690

TITLE ☒ Change ☐ Addition
NAME ALICE BRANDT
STREET ADDRESS 5317 TAMMY LN
CITY-ST-ZIP HOLIDAY FL 34690

TITLE ☐ Delete
NAME D
STREET ADDRESS MORRIS, AL
CITY-ST-ZIP 5013 TAMMY LN
HOLIDAY FL 34690

TITLE ☐ Change ☐ Addition
NAME PEGGY LAPP
STREET ADDRESS 5311 TAMMY LN
CITY-ST-ZIP HOLIDAY FL 34690

TITLE ☐ Delete
NAME D
STREET ADDRESS NADEALE, PATRICIA
CITY-ST-ZIP 2222 PRESTIGE DRIVE
HOLIDAY FL 34690

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:

SIGNATURE REQUIRED

James L. Carlson

Date

Daytime Phone #

727
937-6069

CR2E037 (9/99)