

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 721768

1. Entity Name

Y C C S PROPERTY OWNERS ASSOCIATION, INC.

FILED
Apr 13, 2000 8:00 am
Secretary of State

04-13-2000 90059 016 ****61.25

Principal Place of Business

Mailing Address

3883 S E FAIRWAY EAST
STUART FL 34997

3883 S E FAIRWAY EAST
STUART FLA 34997-6119

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

59-1426270

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAPLAN, MICHAEL L
3883 SE FAIRWAY E
STUART FL 34997

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 PD ☒ Delete
NAME HOGAN, JAMES
STREET ADDRESS 2931 SE FAIRWAY WEST
CITY-ST-ZIP STUART FL 34997

TITLE PD ☐ Change ☒ Addition
NAME WALTER PALMER
STREET ADDRESS 4033 SE FAIRWAY EAST
CITY-ST-ZIP STUART, FL 34997

TITLE VD ☐ Delete
NAME TRINKINO, VERNE A
STREET ADDRESS 2951 SE FAIRWAY WEST
CITY-ST-ZIP STUART FL 34997

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

TITLE TD ☐ Delete
NAME ROWE, KEITH
STREET ADDRESS 3654 SE FAIRWAY EAST
CITY-ST-ZIP STUART FL 34997

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

TITLE SD ☒ Delete
NAME WELSHEIMER, BILL
STREET ADDRESS 3602 SE COURT DR
CITY-ST-ZIP STUART FL 34997

TITLE SD ☐ Change ☒ Addition
NAME DOROTHY DUMCZUS
STREET ADDRESS 3062 SE FAIRWAY WEST
CITY-ST-ZIP STUART, FL 34997

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VD ☐ Change ☒ Addition
NAME WELSHEIMER, BILL
STREET ADDRESS 3602 SE COURT DR
CITY-ST-ZIP STUART, FL 34997

TITLE ☐ Delete
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)(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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/29/00 561-287-3736

Date

Daytime Phone #

CR2E037 (9/99)