2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 24, 2000 8:00 am
Secretary of State
05-24-2000 90191 035 ****61.25

DOCUMENT # 728896

1. Entity Name

WILLIAMSBURG VILLAGE NORTH HOMEOWNERS ASSOCIATIO

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
50 NEEDLE BLVD OFFICE BOX 100 MERRITT ISLAND FL 32953 US	50 NEEDLE BLVD OFFICE. BOX 100 MERRITT ISLAND FL 32953-3380 US

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 59-1559809 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DIAMOND, DAVID
200 S SYKES PKWY
UNIT 104
MERRITT ISLAND FL 32952

7. Name and Address of New Registered Agent

Name CHARLES KANE

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

5340 N ATLANTIC AVE

City COCOA BEACH **FL** Zip Code 32931

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 _____ 4/29 DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DIAMOND, DAVID 200 S SYKES PKWY, UNIT 104 MERRITT ISLAND FL 32952	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DEJULIO, JON 50 NEEDLE BLVD, UNIT 2 MERRITT ISLAND FL 32953	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST Secretary	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D O'GEEN, SHIRLEY 200 S SYKES PKWY, UNIT 104 MERRITT ISLAND FL 32952	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DENYER, DAVE 1001 POINTS FETTA ST COCOA FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD O'GEEN, CHARLES 200 S SYKES CREEK PKY, UNIT 104 MERRITT ISLAND FL 32952	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICHARDSON, WILLIAM 470 RIVERSIDE AVE MERRITT ISLAND FL 32953	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DIAMOND, JANET 200 S. SYKES CREEK # 104 MERRITT ISLAND FL 32952	☐ Change ☐ Addition

CR2E037 (9/99)

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: Charles L. O'Geen SIGNATURE REQUIRED Charles L. O'Geen 4/2/2000 452 6300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #