

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 729113

1. Entity Name

DELAND OAKS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

100 EAST KENTUCKY AVENUE
DELAND FLORIDA 32724

100 EAST KENTUCKY AVENUE
DELAND FLORIDA 32724-2375

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

59-1724494

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

TAYLOR, ROBERT L
% TAYLOR & CARLS, P.A., SUITE 820
1900 SUMMIT TOWER BOULEVARD
ORLANDO FL 32810

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 NAME STREET ADDRESS CITY-ST-ZIP	PD LAUMARK, VIGGO 1624 MERCERS FERNERY RD DELAND FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SHIPMAN, MARCUS B. 100 E. KENTUCKY AVE J103 DELAND FL 32724	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FOGLEYMAN, KAREN S 100 E KENTUCKY AVE 86 DELAND FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD FUHRMANN, MAURICE J. 100 E. KENTUCKY AVE H5 DELAND FL 32724	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RHODES, H V 100 E KENTUCKY AVE K4 DELAND FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHIPMAN, MARCUS 100 E KENTUCKY AVE J103 DELAND FL 32724	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD STOVER, LEE 100 E. KENTUCKY AVE A2 DELAND FL 32724	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHERNYSH, SUETTA 911 MESQUITE TR DELAND FL	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GRIECO, BETTY 100 E. KENTUCKY AVE. G6 DELAND FL 32724	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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

Date

Daytime Phone #

FILED
Apr 17, 2000 8:00 am
Secretary of State

04-17-2000 90014 049 ****61.25



DO NOT WRITE IN THIS SPACE

Charles H. Vanner Rhodes 4-5-00 904/738-0409