

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2003 8:00 am
Secretary of State

01-21-2003 90133 031 ****61.25

DOCUMENT # 733349

1. Entity Name
SUNTREE MASTER HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
7550 SPYGLASS HILL ROAD -
MELBOURNE FL 32940
US

Mailing Address
7550 SPYGLASS HILL ROAD
MELBOURNE FL 32940
US

70012868



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 59-2176316

Applied For

Not Applicable

Zip

Country

Zip

Country

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

DYER, DAVID W ESQ.
325 FIFTH AVENUE
SUITE 205
INDIALANTIC FL 32903

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. I am familiar with, and accept the obligations of registered agent.

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 Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☒ Delete
NAME **BENNETT, JIM**
STREET ADDRESS **517 DEERFIELD DRIVE**
CITY-ST-ZIP **MELBOURNE FL 32940**

TITLE **DP** ☐ Change ☒ Addition
NAME **McGeary, Steve**
STREET ADDRESS **1136 Granada Court**
CITY-ST-ZIP **Melbourne, FL 32940**

TITLE **D** ☐ Delete
NAME **RIEHL, BILL**
STREET ADDRESS **1398 CYPRESS TRACE DR**
CITY-ST-ZIP **MELBOURNE FL 32940**

TITLE **DS** ☐ Change ☒ Addition
NAME **Cornell, Ken**
STREET ADDRESS **673 Ashbury Avenue**
CITY-ST-ZIP **Melbourne, FL 32940**

TITLE **D** ☐ Delete
NAME **KNICK, BARBARA**
STREET ADDRESS **7430 SPIGLISS HILL RD**
CITY-ST-ZIP **MELBOURNE FL 32940**

TITLE **D** ☐ Change ☒ Addition
NAME **Collins, Robert**
STREET ADDRESS **907 Fostoria Drive**
CITY-ST-ZIP **Melbourne, FL 32940**

TITLE **D** ☐ Delete
NAME **HOAGLAND, GUY**
STREET ADDRESS **1021 STRATFORD PLACE**
CITY-ST-ZIP **MELBOURNE FL 32940**

TITLE **D** ☐ Change ☒ Addition
NAME **Rhodes, Barry**
STREET ADDRESS **759 Pine Island Drive**
CITY-ST-ZIP **Melbourne, FL 32940**

TITLE **SD** ☐ Delete
NAME **LOPEZ, ED**
STREET ADDRESS **373 CYPRESS TRACE DRIVE**
CITY-ST-ZIP **MELBOURNE FL 32940**

TITLE **Treas.** ☐ Change ☒ Addition
NAME **Mahon, Jack**
STREET ADDRESS **7550 Spyglass Hill Road**
CITY-ST-ZIP **Melbourne, FL 32940**

TITLE **D** ☐ Delete
NAME **MILES, FORREST**
STREET ADDRESS **425 CARMEL DRIVE**
CITY-ST-ZIP **MELBOURNE FL 32940**

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

CR2E037 (10/02)

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 of Jack Mahon, Treasurer 1/7/03 733-242-8961