

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2002 8:00 am
Secretary of State

03-27-2002 90063 016 ****61.25

DOCUMENT # 737593

1. Entity Name

ARROWHEAD MOBILE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**DONNA GROSSO-P
 2ND CT
 LANTANA FL 33462**

**% DONNA GROSSO-P
 4162 2ND CT
 LANTANA FL 33462
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2667502

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

**EIDE, RONALD N
 6233 HOLLY LN
 300 COLORADO AVE., SUITE 210
 LANTANA FL 33462**

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 Delete
 NAME **VP ANDREWS, BILL**
 STREET ADDRESS **8115 HOLLY LN**
 CITY-ST-ZIP **LANTANA FL**

TITLE Change Addition
 NAME **TRES TONI NORRIS**
 STREET ADDRESS **4140 2ND COURT**
 CITY-ST-ZIP **LANTANA, FL 33462**

TITLE Delete
 NAME **D CARROLL, EDNA**
 STREET ADDRESS **6440 DOGWOOD LN**
 CITY-ST-ZIP **LANTANA FL**

TITLE Change Addition
 NAME **SEC LOIS BROECKER**
 STREET ADDRESS **6208 S. JOSHUA LN**
 CITY-ST-ZIP **LANTANA FL**

TITLE Delete
 NAME **D HEYBOER, BOB**
 STREET ADDRESS **4080 5 AV**
 CITY-ST-ZIP **LANTANA FL 33462**

TITLE **D** Change Addition
 NAME **VERONA LEE**
 STREET ADDRESS **6350 S. GUAVA**
 CITY-ST-ZIP **LANTANA, FL**

TITLE Delete
 NAME **D TAYLOR, BUD**
 STREET ADDRESS **6182 HOLLY LN**
 CITY-ST-ZIP **LANTANA FL 33462**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D KIMMEL, EDWIN**
 STREET ADDRESS **4080 8TH CT.**
 CITY-ST-ZIP **LANTANA FL 33462**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D BROECKER, ERIC**
 STREET ADDRESS **6208 S JOSHUA LN**
 CITY-ST-ZIP **LANTANA FL**

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 *Toni Norris (Arbuthnot) Pres 3/15/02 (561) 967-9983*

CR2E037 (9/01)