2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 30, 2001 8:00 am
Secretary of State
01-30-2001 90009 046 ****61.25

DOCUMENT # 740863

1. Entity Name

CARIBBEAN ISLES RESIDENTIAL PARK CIVIC ASSOCIATI

Principal Place of Business	Mailing Address
405 ELSBERRY RD APOLLO BEACH FL 33572	405 ELSBERRY RD APOLLO BEACH FL 33572

DO NOT WRITE IN THIS SPACE

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 59-1994122 ☐ 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
SMASAL, BETTY M 196 N SAINT THOMS CIR. APOLLO BCH. FL 33572	Name BETTY J HOUGH Street Address (P.O. Box Number is Not Acceptable) 126 ST JOHN'S WAY W. City APOLLO BEACH FL Zip Code 33572

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 Betty J. Hough 1/18/01
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	T HAMLIN, BILL 225 ST THOMAS CIR N APOLLO BEACH 33572	☐ Delete	P BETTY J HOUGH 126 ST JOHN'S WAY W. APOLLO BEACH FL 33572	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RAY, BARBARA 112 ST ANNE'S CIRCLE W APOLLO BEACH FL 33572	☐ Delete	JAMES S. JOAN A. WILLIAMS 116 ST GEORGE CIR. N. APOLLO BEACH FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STEVENS, RICHARD 40 ST LUCIA LOOP W APOLLO BEACH FL 33572	☑ Delete	D ROBERT SMASAL 196 ST THOMAS CIR N. APOLLO BEACH FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SMASAL, BETTY M 196 N SAINT THOMAS CIR. APOLLO BCH FL 33572	☑ Delete	D MARY LOU CARLSON 101 ST LUCIA LP. W. APOLLO BEACH FL	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAUGH, BETTY 126 ST JOHN'S WAY W APOLLO BCH FL 33572	☑ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V BARTZ, PATSY 124 ST PIERRE'S WAY APOLLO BEACH FL 33572	☐ Delete		☐ Change ☐ Addition

CR2E037 (10/00)

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: Betty J. Hough 1/18/01 813-641-9701
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #