

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

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

04-21-2003 90318 012 ****61.25

DOCUMENT # 745706

1. Entity Name
HOME OWNERS ASSOCIATION OF PORT BUENA VISTA, INC.



Principal Place of Business
**120 MARGARITA RD
EAST PALATKA FL 32131
US**

Mailing Address
**120 MARGARITA RD
EAST PALATKA FL 32131
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 **59-2518205**

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**PRICE, ELLEN J
120 MARGARITA RD
PORT BUENA VISTA
E. PALATKA FL 32131**

7. Name and Address of New Registered Agent

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 \$ \$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 **PD** ☐ Delete
NAME **PRICE, ELLEN**
STREET ADDRESS **120 MARGARITA RD**
CITY-ST-ZIP **E PALATKA FL 32131**

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

TITLE **D** ☐ Delete
NAME **WEED, HAROLD**
STREET ADDRESS **114 N GERALDO**
CITY-ST-ZIP **EAST PALATKA FL 32131**

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

TITLE **VD** ☒ Delete
NAME **RIVERS, JOSEPH**
STREET ADDRESS **110 N. GERALDO RD**
CITY-ST-ZIP **E. PALATKA FL 32131**

TITLE ☐ Change ☒ Addition
NAME **Lynch, Larry**
STREET ADDRESS **115 Margarita Rd.**
CITY-ST-ZIP **E. Palatka FL 32131**

TITLE **D** ☒ Delete
NAME **HIMELAUGH, ALLEN**
STREET ADDRESS **115 MARARITA RD**
CITY-ST-ZIP **E. PALATKA FL 32131**

TITLE ☒ Change ☒ Addition
NAME **TD**
STREET ADDRESS **Elijah Lowery**
CITY-ST-ZIP **118 Margarita Rd.**
E. Palatka, Fl. 32131

TITLE **CSD** ☐ Delete
NAME **THOMPSON, JOHN**
STREET ADDRESS **110 MARGARITA RD**
CITY-ST-ZIP **EAST PALATKA FL 32131**

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

TITLE **RSD** ☐ Delete
NAME **SERWE, CAROLYN**
STREET ADDRESS **107 MARGARITA RD**
CITY-ST-ZIP **EAST PALATKA FL 32131**

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: **Ellen Price** **REQUIRED** **Ellen Price** **4/16/03** **386 3256561**

CR2E037 (10/02)

Attachment
DOCT 745700

90096273

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO
OFFICERS AND DIRECTORS
IN 10 (11)

11. D
Lanagan, Ron
118 Million St.
E. Palatka, Fl. 32131

(X) Addition