

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 745931

1. Entity Name

OUSLEY ESTATES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 1582
OKEECHOBEE FL 34973-1582

P.O. BOX 1582
OKEECHOBEE FL 34973-1582

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

59-2089489

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

WILLIAMS, ROBERT E
4196 SW 13TH WAY
OKEECHOBEE FL 34974

Name Henrietta Palumbo

Street Address (P.O. Box Number is Not Acceptable)

3649 SW. 13th Terrace

City Okeechobee

FL

Zip Code 34974

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 Henrietta Palumbo Henrietta Palumbo, TD, 04-03-00
(NOTE: Registered Agent signature required when reinstating)

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 PD ☒ Delete
NAME WILLIAMS, ROBERT
STREET ADDRESS 4196 SW 13 WAY
CITY-ST-ZIP OKEECHOBEE FL 34974

TITLE PD ☒ Change ☐ Addition
NAME Carl Diesslin
STREET ADDRESS 4065 S.W. 9th Way
CITY-ST-ZIP Okeechobee, FL. 34974

TITLE VD ☒ Delete
NAME LAMB, C. EDWARD
STREET ADDRESS 3617 SW 13TH TERRACE
CITY-ST-ZIP OKEECHOBEE FL 34974

TITLE VD ☒ Change ☐ Addition
NAME Cathy Collins
STREET ADDRESS 1069 S.W. 39th Lane
CITY-ST-ZIP Okeechobee, FL 34974

TITLE TD ☐ Delete
NAME PALUMBO, HENRIETTA
STREET ADDRESS 3649 SW 13 TERRACE
CITY-ST-ZIP OKEECHOBEE FL 34974

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

TITLE SD ☒ Delete
NAME MACKIN, WALT
STREET ADDRESS 3688 SW 13TH TERRACE
CITY-ST-ZIP OKEECHOBEE FL 34974

TITLE SD ☒ Change ☐ Addition
NAME Johnnie Blevins
STREET ADDRESS 969 SW. 39th Lane
CITY-ST-ZIP Okeechobee, FL. 34974

TITLE D ☐ Delete
NAME WAKELEY, WAYNE
STREET ADDRESS 4200 S.W. 16TH AVE
CITY-ST-ZIP OKEECHOBEE FL 34974

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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: Henrietta Palumbo Henrietta Palumbo TD, 04-03-00, 863-467-5197
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

FILED
Apr 07, 2000 8:00 am
Secretary of State

04-07-2000 90047 011 ****61.25



DO NOT WRITE IN THIS SPACE