

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2001 8:00 am
Secretary of State

03-12-2001 90478 021 ****61.25

DOCUMENT # 747240

1. Entity Name

SPANISH OAKS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

P.O. BOX 1022
 PALM HARBOR FL 34682

Mailing Address

P.O. BOX 1022
 PALM HARBOR FL 34682

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2088271

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

ROTZ, LINDA
841 SPANISH OAKS BLVD
PALM HARBOR FL 34683

7. Name and Address of New Registered Agent

Name **SONDRA ALLEN**

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

960 SPANISH OAKS BLVD.

City **PALM HARBOR, FL** Zip Code **34683**

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

Sondra F. Allen

SONDRA ALLEN, PD

2-28-01

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROTZ, LINDA 841 SPANISH OAKS BLVD. PALM HARBOR FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MACWEN, PATRICIA 2034 WINDING OAKS DR PALM HARBOR FL 34683	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CORNELL, TINA 1022 SPANISH OAKS BLVD. PALM HARBOR FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD HATTON, JON D 2009 CINDY CIR. PALM HARBOR FL	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ALLEN, SONDRA 960 SPANISH OAKS BLVD. PALM HARBOR, FL 34683	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ORR, WILLIAM 1929 SPANISH OAKS DRIVE S. PALM HARBOR, FL 34683	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BYRD, KIM 952 WINDING OAKS DRIVE PALM HARBOR, FL 34683	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GOSSETT, FRANK 927 WOODLAND DRIVE PALM HARBOR, FL 34683	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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:

Sondra F. Allen

SONDRA ALLEN, PD

2-28-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)