2000 UNIFORM BUSINESS REPORT (UBR)

Feb 28, 2000 8:00 am DOCUMENT #_747257 1. Entity Name Secretary of State CIMARRON HOMEOWNER'S ASSOCIATION, INC. 02-28-2000 90190 023 ****61.25 Principal Place of Business Mailing Address 1012 CIMARRON CIRCLE, NW 1012 CIMARRON CIRCLE. NW **BRADENTON FL 34209** BRADENTON FL 34209-1140 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2024852 Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent -4 Richard Good Street Address (P.O. Box Number is Not Acceptable) SPARRGROVE, WILLIAM 1008 Cimarron Circle, NW 1012 CIMARRON CIRCLE, NW. Bradenton, FL 34209 **BRADENTON FL 34209** Zip Code FI. 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Pavable to 9. Election Campaign Financing **\$5.00** May Be FILE NOW: Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 "'OFFICERS AND DIRECTORS 11. 10. Addition Change TITLE TITLE Delete Richard Good NAME NAME Sparrgrove, William 1008 Cimarron Circle NW 1012 CIMARRON CIRCLE, NW STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Bradenton, FL 34209 CITY-ST-ZIP **BRADENTON FL 34209** X Addition ☐ Change VD. X Delete TITLE TITLE CASTNER DON NAME Robert Blackwood STREET ADDRESS STREET ADDRESS 1008 CIMMARON CIRCLE, NW 1208 Cimarron Circle, NW BRADENTON FL 34209 CITY-ST-ZIP CITY-ST-ZIP Bradenton, FL 34209 Addition Change TITLE ☐ Delete GOOD, JOAN ~~ NAME NAME James C. Brooke STREET ADDRESS STREET ADDRESS 1008 CIMARRON CIRCLE NW 916 Cimarron Circle, NW CITY-ST-ZIP CITY-ST-ZIP BRADENTON, FL 00000 34209 Bradenton, FL 34209 ☐ Change Addition TITLE ☐ Celete TITLE GUTFREUND, MARY NAME STREET ADDRESS STREET ADDRESS 1004 CIMARRON CIRCLE NW CITY-ST-ZIP CITY-ST-ZIP **BRADENTON, FL 00000 34209** 🔽 Delete TITI F Change ■ Addition TITLE 4 STURM, JOHN NAME NAME STREET ADDRESS STREET ADDRESS 915 CIMARRON CIRCLE NW CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL 34209** Change ☐ Addition TITI F TITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

FILED