

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 748653

1. Entity Name

HOOT OWL RIDGE COMMUNITY ASSOCIATION, INC.

FILED
Mar 25, 2002 8:00 am
Secretary of State

03-25-2002 90159 013 ****61.25

80049138



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

STAR ROUTE 3
P.O. BOX 586
SATSUMA FL 32189

124 SUMMIT ROAD
SR3 BOX 905
SATSUMA FL 32189

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2756932

Applied For

Not Applicable

Zip

Country

Zip

Country

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

PENROD, BETTY
124 SUMMIT RD.
SR3 BOX 905
SATSUMA FL 32189

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.

SIGNATURE

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 ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
PENROD, BETTY
SUMMIT RD
SATSUMA FL 32189

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
T
WARK, CHARALEEN E
HC 3 BOX 908
SATSUMA FL 32189

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
S
KIRBY, HELEN
STAR RT 3 BOX 883 HICKORY NUT TRAIL
SATSUMA FL 32189

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

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
P
EVERLY, GORDON
STAR RT 3 BOX 888 HICKORY NUT TRAIL
SATSUMA FL 32189

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
JACKSON-RUBY
200 Highridge Rd
Satsuma, FL 32189

TITLE ☒ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
JACKSON, RUBY
200 HIGHRIDGE ROAD
SATSUMA FL 32189

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
Ronald N Larrow
502 Squirrel Tree Tr. Satsuma FL
32189

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP
T
EVERLY, CHARLES
HILLTOP TERRACE
SATSUMA FL 32189

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: *Betty Penrod*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/02

Date

Daytime Phone #

Trea

CR2E037 (9/01)