

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

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

04-21-2003 90485 013 \*\*\*\*\*61.25

**DOCUMENT # 756009**

1. Entity Name

**GLE HOMEOWNERS, INC.**



Principal Place of Business

P.O. BOX 1256  
GOLDENROD FL 32733-1256

Mailing Address

P.O. BOX 1256  
GOLDENROD FL 32733-1256

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 **59-2571876**

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

**DONLEY, FLOYD T**  
**1700 ASTER DRIVE**  
**WINTER PARK FL 32792**

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 IS \$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 **P** ☐ Delete  
NAME **DONLEY, FLOYD T**  
STREET ADDRESS **1700 ASTER DRIVE**  
CITY-ST-ZIP **WINTER PARK FL 32792**

TITLE **VP** ☐ Change ☒ Addition  
NAME **Reynaldo Rodriguez**  
STREET ADDRESS **8. 3670 Jacquil Lane**  
CITY-ST-ZIP **Winter Park, FL 32792**

TITLE **D** ☒ Delete  
NAME **MCPNAIL, RON**  
STREET ADDRESS **1930 ASTER DRIVE**  
CITY-ST-ZIP **WINTER PARK FL 32792**

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

TITLE **S** ☐ Delete  
NAME **FIELDS, LISA**  
STREET ADDRESS **1940 ASHER DRIVE**  
CITY-ST-ZIP **WINTER PARK FL 32792**

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

TITLE **D** ☐ Delete  
NAME **DONLEY, VANESSA**  
STREET ADDRESS **1700 ASTER DR**  
CITY-ST-ZIP **WINTER PARK FL 32737**

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

TITLE **T** ☐ Delete  
NAME **THOMPSON, RUBY**  
STREET ADDRESS **1981 ASTER DRIVE**  
CITY-ST-ZIP **WINTER PARK FL 32792**

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

TITLE **D** ☐ Delete  
NAME **ALVA, NORMA**  
STREET ADDRESS **1360 GLADIOLAS DR.**  
CITY-ST-ZIP **WINTER PARK FL**

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 another like empowered.

SIGNATURE: *Reynaldo Rodriguez* **REYNALDO RODRIGUEZ** **4/16/03** **407 672-0864**

CR2E037 (10/02)