

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 758410

1. Entity Name

AUTUMN RUN-BEACON RUN HOMEOWNERS ASSOCIATION, IN

Principal Place of Business

6310 CEDARBROOK DR.
PINELLAS PARK FL 34666
US

Mailing Address

P. O. BOX 451
PINELLAS PARK FL 33780-0451
US

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

59-2123016

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

WEST, BRADFORD C
6139 CEDARBROOK DR., N.
PINELLAS PARK FL 34666

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 PD
NAME MARTINEZ, CHARMAINE
STREET ADDRESS 11230 MAXTON WY
CITY-ST-ZIP PINELLAS PARK FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE VPD
NAME JOHNSON, JOE
STREET ADDRESS 10762 64TH ST.
CITY-ST-ZIP PINELLAS PARK FL 33782

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE TD
NAME CABOT, DAVE
STREET ADDRESS 6476 107TH TERR
CITY-ST-ZIP PINELLAS PARK FL

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE DS
NAME STEENBERG, SANDRA
STREET ADDRESS 6531 109TH TERR.
CITY-ST-ZIP PINELLAS PARK FL 33782

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME KERR, JOHN
STREET ADDRESS 11049 62 ST
CITY-ST-ZIP PINELLAS PARK FL

☒ Delete

TITLE D
NAME Rivera, Tonya
STREET ADDRESS 6281 104th Avenue
CITY-ST-ZIP Pinellas Park Florida 33782

☐ Change

☒ Addition

TITLE TD
NAME MARTINEZ, CHARMAINE
STREET ADDRESS 11230 MAXTON WAY
CITY-ST-ZIP PINELLAS PARK FL 33782

☐ Delete

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
May 16, 2000 8:00 am
Secretary of State

05-16-2000 90090 041 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)

4/27/00 (727)397-6666ed.261