

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 759384

1. Entity Name

INTERLACHEN CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

647 N. INTERLACHEN AVE.
WINTER PARK FL 32789
US

647 N. INTERLACHEN AVE.
WINTER PARK FL 32789
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

NOT APPLICABLE

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

BIRD, CAROLYN
647 N. INTERLACHEN AVE.
WINTER PARK FL 32789

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

Due 5/1/02

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 ☐ Delete

S CRITCHFIELD, NANCY
STREET ADDRESS 645 N INTERLACHEN AVE
CITY-ST-ZIP WINTER PARK FL 32789

TITLE NAME ☐ Delete

D ROBBS, ANN
STREET ADDRESS 627 N INTERLACHEN AVE
CITY-ST-ZIP WINTER PARK FL 32789

TITLE NAME ☐ Delete

VPD BRIDGEMAN, JACK
STREET ADDRESS 625 N INTERLACHEN AVE
CITY-ST-ZIP WINTER PARK FL 32789

TITLE NAME ☐ Delete

TVP BIRD, CAROLYN
STREET ADDRESS 647 N INTERLACHEN AVE
CITY-ST-ZIP WINTER PARK FL 32789

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

TITLE NAME ☐ Delete

STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☐ Addition

TITLE NAME ☐ Change ☒ Addition

PD MORRIS T. BIRD
STREET ADDRESS 647 N INTERLACHEN AVE
CITY-ST-ZIP WINTER PARK, FL 32789

TITLE NAME ☐ Change ☒ Addition

D DANIEL G CROZIER, JR
STREET ADDRESS 637 N INTERLACHEN AVE
CITY-ST-ZIP WINTER PARK, FL 32789

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: CAROLYN BIRD REQUIRE CAROLYN BIRD

1/4/02 407-628-1090

FILED
Jan 08, 2002 8:00 am
Secretary of State

01-08-2002 90013 033 ****61.25



DO NOT WRITE IN THIS SPACE

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CR2E037 (9/01)