FILED

## 2002 UNIFORM BUSINESS REPORT (UBR)

## Mar 20, 2002 8:00 am DOCUMENT # 761929 Secretary of State 1. Entity Name 03-20-2002 90058 001 \*\*\*\*61.25 TURNER TRACE TOWNHOMES OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 5331, BRADBURY, COURT #12 5331 BRADBURY COURT #12 TAMPA FL 33624 TAMPA FL 33624 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2267871 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) LAWTON, C. WARREN 5312 RIDGEWELL CT **TAMPA FL 33624** Zip Code FL 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 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Delete TITLE (9/01 TITLE Change PAULETTE FERRLL 5322 BRADBURYCY TAMPA FL 33624 LAWTON, C. WARREN NAME NAME STREET ADDRESS 5312 RIDGEWELL CT STREET ADDRESS CR2E037 CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33624 Addition TITLE TITLE Delete ☐ Change LYNNE BOTHERN 53.06\_BRADBURY CT ECKEL, LISA NAME NAME 5316.PUTNAM CT. STREET ADDRESS STREET ADDRESS AMPA FL 33624 CITY-ST-ZIP TAMPA FL 33624 CITY-ST-ZIP รก □ Delete TITLE Change Addition TITLE sows wader WEEKS, ETTA NAME NAME 02 ROIIINS Ford CT STREET ADDRESS 5318 RIDGEWELL CT. STREET ADDRESS CITY-ST-7IP CITY-ST-7IP TAMPA FL 33624 □ Change Addition TITLE Detete TITLE Barbara Para MOESHING, CARL NAME NAME 14102 WINSLOW PL. STREET ADDRESS STREET ADDRESS 14911 BARBY AVE. CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33624 Addition DVINCENT BROWN TITLE Delete TITLE ☐ Change stinson, Deanna NAME NAME 5325 Bradbury CT STREET ADDRESS 5316 BRADBURY CT. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33624 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 evincificated 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: