

2009

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

ATX1

DOCUMENT # 762907

1. Entity Name
Green Leaf Homeowners Association, Inc.

FILED
09 MAR 13 PM 2:49
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

200146067332
03/18/09--01003--026 **61.25

2. Principal Place of Business
5745 Southwest 75th Street

Suite, Apt #, etc
Private Mail Box 155

City & State
Gainesville, Florida

3. Mailing Address
5745 Southwest 75th Street

Suite, Apt. #, etc,
Private Mail Box 155

City & State
Gainesville, Florida

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Zip **32608** Country **USA**

Zip **32608** Country **USA**

4. FEI Number
59-2734772

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name
Donald G. Powell

Street Address (P.O. Box Number is Not Acceptable)
1863 State Road 20

City **Hawthorne** FL Zip Code **32640**

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 _____ DATE _____
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FEE IS \$61.25
Initial or Amended UBR

9. Election Campaign Financing \$5.00 May Be Added to Fees
Trust Fund Contribution.

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Jordon, Alisha 6710 Southwest 45th Avenue Gainesville, Florida 32608
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Lopez, Christy 4333 Southwest 67th Terrace Gainesville, Florida 32608
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Ireland, Tiffany 7001 Southwest 46th Avenue Gainesville, Florida 32608
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Powell, Donald G. 1863 State Road 20 Hawthorne, Florida 32640
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11.

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3/13/09 cc

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 on an attachment with an address with all other title empowered.

SIGNATURE: Donald G. Powell **Donald G. Powell** **February 25, 2009** **352-332-1012**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #