

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 10, 2001 8:00 am
Secretary of State

05-10-2001 90050 027 ****61.25

DOCUMENT # 764947

1. Entity Name

GREEN BRIAR TOWNHOUSE HOMEOWNERS ASSOCIATION, IN

Principal Place of Business

Mailing Address

**1401 GREENBRIAR PKWY
 STE 4
 GULF BREEZE FL 32561**

**1401 GREENBRIAR PKWY
 STE 4
 GULF BREEZE FL 32561**

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

59-2913129

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

**STUCKEY, RICHARD G
 1401 GREENBRIAR PKWY
 STE 4
 GULF BREEZE FL 33561**

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]

Richard G. Stuckey

4/27/01

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	<input type="checkbox"/> Delete
NAME	STUCKEY, RICHARD H	
STREET ADDRESS	1401 GREENBRIAR PKWY, STE 4	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	BURDA, BRIAN	
STREET ADDRESS	1401 GREENBRIAR PKWY STE 4	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE	VD	<input type="checkbox"/> Delete
NAME	HOUSER, GEORGE	
STREET ADDRESS	1401 GREENBRIAR PKWY STE 1	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Stuckey, Richard G.	
STREET ADDRESS	1401 Greenbriar Pkwy Suite 4	
CITY-ST-ZIP	Gulf Breeze FL 32561	
TITLE	VPD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Burda, Brian	
STREET ADDRESS	1401 Greenbriar Pkwy Suite 4	
CITY-ST-ZIP	Gulf Breeze, FL 32561	
TITLE	VD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Houser, George	
STREET ADDRESS	1401 Greenbriar Pkwy Suite 1	
CITY-ST-ZIP	Gulf Breeze FL 32561	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.

SIGNATURE:

[Signature]

Richard G Stuckey 4/27/01

850-934-5263

CR2E037 (10/00)