

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2003 8:00 am
Secretary of State

04-14-2003 90106 048 ****61.25

DOCUMENT # 767274

1. Entity Name

SOUTHERN PINES RESIDENT'S ASSOCIATION, INC.



Principal Place of Business

**925 US 301 BLVD E LOT 76
BRADENTON FL 34203
US**

Mailing Address

**925 US 301 BLVD E. LOT 76
BRADENTON FL 34203
US**

55038031



2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

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

**PRUIS, JACOB
925 U. S. 301 BLVD E.
LOT 76
BRADENTON FL 34203**

7. Name and Address of New Registered Agent

Name

ELAM, KATHERYN

Street Address (P.O. Box Number is Not Acceptable)

925 301 BLVD E

LOT #7

City

Bradenton

FL

Zip Code

34203

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

[Signature]

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

5/2/03

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **TD** ☐ Delete
NAME **PRUIS, JACOB**
STREET ADDRESS **925 U. S. 301 BLVD. E. 76**
CITY-ST-ZIP **BRADENTON FL**

TITLE **T** ☐ Delete
NAME **REYNHOUT, JAMES**
STREET ADDRESS **925 301 BLVD E #77**
CITY-ST-ZIP **BRADENTON FL 34203**

TITLE **T** ☒ Delete
NAME **GUILBAULT, RAY**
STREET ADDRESS **925 301 BLVD. E # 72**
CITY-ST-ZIP **BRADENTON FL**

TITLE **P** ☐ Delete
NAME **ELAM, KATHERYN**
STREET ADDRESS **925 301 BLVD E #7**
CITY-ST-ZIP **BRADENTON FL**

TITLE **T** ☐ Delete
NAME **SWICKARD, RANDALL**
STREET ADDRESS **925 301 BLVD E #14**
CITY-ST-ZIP **BRADENTON FL**

TITLE **S** ☒ Delete
NAME **CHALLEN, WANDA**
STREET ADDRESS **925 301 BLVD E #55**
CITY-ST-ZIP **BRADENTON FL 34203**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **S** ☐ Change ☒ Addition
NAME **Phyllis Miller**
STREET ADDRESS **925 301 Blvd. E. #101**
CITY-ST-ZIP **Bradenton FL 34203**

TITLE **T** ☐ Change ☒ Addition
NAME **Grace Bruno**
STREET ADDRESS **925 301 Blvd. E. #104**
CITY-ST-ZIP **Bradenton FL 34203**

TITLE **V-P** ☐ Change ☒ Addition
NAME **Ana Rodriguez**
STREET ADDRESS **925 301 Blvd. E. #66**
CITY-ST-ZIP **Bradenton FL 34203**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]

Date **4-11-03**

Daytime Phone #

941-755 1254

CR2E037 (10/02)