

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

FILED
Apr 02, 2003 8:00 am
Secretary of State

04-02-2003 90385 043 ****61.25

DOCUMENT # 767660

1. Entity Name
BROWNSVILLE STATION HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**611 CENTER STREET
UNIT #11
FORT WALTON BEACH FL 32547**

Mailing Address

**611 CENTER STREET
UNIT #11
FORT WALTON BEACH FL 32547**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

4607 Hickory Shores Blvd

Suite, Apt. #, etc.

City & State

Gulf Breeze, FL

Zip

32503

Country

USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2376210**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

**SMITH-PLUNKET, LAURIE
611 CENTER STREET
UNIT #11
FORT WALTON BEACH FL 32547**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Laurie Smith-Plunket

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

(NOTE: Registered Agent signature required when reinstating)

DATE

1/20/03

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 **SMITH-PLUNKET, LAURIE**
STREET ADDRESS **611 CENTER STREET, UNIT #11**
CITY-ST-ZIP **FORT WALTON BEACH FL 32547**

TITLE **VPD** ☐ Delete
NAME **EVANS, NORMAN**
STREET ADDRESS **611 CENTER ST #2**
CITY-ST-ZIP **FORT WALTON BEACH FL 32547**

TITLE **SD** ☒ Delete
NAME **PATTON, TAMARA**
STREET ADDRESS **611 CENTER ST #7**
CITY-ST-ZIP **FORT WALTON BEACH FL 32547**

TITLE **PD** ☐ Delete
NAME **WAUGH, JAMES**
STREET ADDRESS **422 PELHAM ROAD**
CITY-ST-ZIP **FORT WALTON BEACH FL 32547**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **TD** ☒ Change ☐ Addition
NAME **SMITH-PLUNKET**
STREET ADDRESS **4607 HICKORY SHORES BLVD**
CITY-ST-ZIP **GULF BREEZE, FL 32503**

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

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

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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:

Laurie Smith-Plunket

1/20/03 (050)916-9233

CR2E037 (10/02)