

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 768098

1. Entity Name

THE ASSOCIATION OF WOOD BROOK MOBILE HOME ESTATE

Principal Place of Business

1510 ARIANA ST
LOT 388
LAKELAND FL 33803

Mailing Address

1510 ARIANA ST
LOT 388
LAKELAND FL 33803-6928

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

59-2201272

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

KIMMEY, ROBERT L
1510 W ARIANA ST, LOT 388
LAKELAND FL 33803

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, 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 ☐ Delete
NAME KUEPER, CLEMENT
STREET ADDRESS 1510 W ARIANA ST., LOT 358
CITY-ST-ZIP LAKELAND FL 33803

TITLE PD ☒ Change ☐ Addition
NAME ALFORD, GEORGE
STREET ADDRESS 1510 W. ARIANA ST LOT 108
CITY-ST-ZIP LAKELAND FL, 33803

TITLE VD ☐ Delete
NAME ALFORD, GEORGE
STREET ADDRESS 1510 W ARIANA ST., LOT 108
CITY-ST-ZIP LAKELAND FL 33803

TITLE VD ☐ Change ☐ Addition
NAME JOHNSTON, BOWEN F. JR
STREET ADDRESS 1510 ARIANA ST LOT 307
CITY-ST-ZIP LAKELAND FL 33803

TITLE SD ☐ Delete
NAME OBERHAUS, MONA
STREET ADDRESS 1510 W ARIANA ST, SUITE 434
CITY-ST-ZIP LAKELAND FL

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

TITLE TD ☐ Delete
NAME KIMMEY, ROBERT L
STREET ADDRESS 1510 W ARIANA ST., LOT 388
CITY-ST-ZIP LAKELAND FL 33803

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

TITLE D ☐ Delete
NAME OLIVER, CHARLES
STREET ADDRESS 1510 ARIANA ST. STE 318
CITY-ST-ZIP LAKELAND FL

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

TITLE D ☐ Delete
NAME THOMPSON, RUTH
STREET ADDRESS 1510 W ARIANA ST, SUITE 402
CITY-ST-ZIP LAKELAND FL

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED
Mar 17, 2000 8:00 am
Secretary of State

03-17-2000 90069 012 ****61.25



DO NOT WRITE IN THIS SPACE

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