

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

FILED
Apr 07, 2003 8:00 am
Secretary of State

03-24-2003 90245 021 ****61.25

DOCUMENT # 769680



1. Entity Name
**CEDAR RUN OF MELBOURNE HOMEOWNERS ASSOCIATION, I
NC.**

Principal Place of Business Mailing Address
P.O. BOX 361052 P.O. BOX 361052
MELBOURNE FL 32936 MELBOURNE FL 32936

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 **59-2516749** Applied For
 Not Applicable

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



CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

BROAD, TODD A
3715 DRIFTWOOD DRIVE
CEDAR RUN
MELBOURNE FL 32935

7. Name and Address of New Registered Agent

Name **POLLOCK JAMES**
Street Address (P.O. Box Number is Not Acceptable)
3724 TEAKWOOD COURT
City **MELBOURNE** FL Zip Code **32935**

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 **James Pollock** **James J Pollock** 03-22-2003
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 Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	WORLAND, KELLY	
STREET ADDRESS	3688 BRENTWOOD COURT	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	VP PRESIDENT	<input type="checkbox"/> Delete
NAME	POLLOCK, JAMES	
STREET ADDRESS	3724 TEAKWOOD COURT	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	BROAD, TODD A	
STREET ADDRESS	3715 DRIFTWOOD DRIVE	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	ABRAHAM, THOMAS	
STREET ADDRESS	3676 BRENTWOOD COURT	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	VICE PRES.	<input type="checkbox"/> Delete
NAME	ODATHY BOND	
STREET ADDRESS	3671 BRENTWOOD COURT	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	SECRET/TREAS.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHARLET ROUSAVILLE T	
STREET ADDRESS	3720 DOGWOOD COURT	
CITY-ST-ZIP	MELBOURNE FL 32935	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VICE PRES.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ODATHY BOND	
STREET ADDRESS	3671 BRENTWOOD COURT	
CITY-ST-ZIP	MELBOURNE FL 32935	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: **James J Pollock**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03-22-2003 321-727-5450

Date Daytime Phone #

CR2E037 (10/02)