

FILED

Apr 21, 2002 8:00 am  
Secretary of State

03-24-2002 90059 021 \*\*\*150.00

## 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # H00990

1. Entity Name

TWIN LAKES RESIDENT OWNERS' ASSOCIATION, INC.

Principal Place of Business

2419 GULF TO BAY  
LOT 1221  
CLEARWATER FL 34625  
US

Mailing Address

2419 GULF TO BAY  
LOT 815  
CLEARWATER FL 33765  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number 59-2412185

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

GAUER, EDGAR J  
2419 GULF TO BAY  
LOT 815  
CLEARWATER FL 33765

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐  
(See criteria on back)FILE NOW!!! FEE IS \$150.00  
After May 1, 2002 Fee will be \$550.00  
Make Check Payable to Department of State10. Election Campaign Financing ☐ \$5.00 May Be Added to Fees  
Trust Fund Contribution.

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME COMPORT, JAMES  
STREET ADDRESS 2419 GULF TO BAY LOT 1424  
CITY-ST-ZIP CLEARWATER FL 33765 ☐ DeleteTITLE Pres.  
NAME E. Campbell  
STREET ADDRESS PO 3604  
CITY-ST-ZIP Clearwater Fl. 33767 ☒ Change ☐ AdditionTITLE T  
NAME GAUER, EDGAR J  
STREET ADDRESS 2419 GULF TO BAY LOT #815  
CITY-ST-ZIP CLEARWATER FL 33765 ☐ DeleteTITLE T  
NAME Sylvia Robinson  
STREET ADDRESS 2419 Gulf to Bay Lot 121  
CITY-ST-ZIP Clearwater, FL 33765 ☒ Change ☐ AdditionTITLE D  
NAME COMPORT, JOHN  
STREET ADDRESS 2419 GULF TO BAY LOT 1422  
CITY-ST-ZIP CLEARWATER FL 33765 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE D  
NAME HAAS, CHARLES  
STREET ADDRESS 2419 GULF TO BAY LOT 271  
CITY-ST-ZIP CLEARWATER FL 33765 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE S  
NAME MAERZ, RONALD  
STREET ADDRESS 2419 GULF TO BAY LOT 1420  
CITY-ST-ZIP CLEARWATER FL 33765 ☐ DeleteTITLE SECRETARY  
NAME SYLVIA A. BURKE  
STREET ADDRESS 2419 Gulf to Bay Lot 1324  
CITY-ST-ZIP Clearwater, FL 33765 ☒ Change ☐ AdditionTITLE D  
NAME STAATS, WALTER  
STREET ADDRESS 2419 GULF TO BAY #817  
CITY-ST-ZIP CLEARWATER FL 33765 ☐ DeleteTITLE  
NAME MARTHA WHITLEY  
STREET ADDRESS 2419 GULF TO BAY #712  
CITY-ST-ZIP Clearwater, FL 33765 ☐ Change ☒ Addition

13. 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 607, Florida Statutes, and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Elizabeth A. Campbell President  
727 723 9303

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2034 (9/01)