

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # J17066

1. Entity Name

JETER STREET W I HOMEOWNERS ASSOCIATION INC.

FILED

Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90090 036 ***150.00

Principal Place of Business

Mailing Address

3301 ALTERNATE 19
LOT 510
DUNEDIN FL 34698
US

3301 ALTERNATE 19
LOT 510
DUNEDIN FL 34698-1548
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2687241

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MALLER, KAREN E ESQ
NATIONSBANK TOWER ONE PROGRESS PLAZA
SUITE 1210
ST PETERSBURG FL 33701

Name

JUSTIN G. JOSEPH, P.A.

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

1266 SOUTH PINELLAS AVENUE

TARPON SPRINGS, FL. 34689

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.

X

SIGNATURE

JUSTAN G. JOSEPH

1-19-00

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, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
NAME GARVEY, CLIVE
STREET ADDRESS 3301 ALTERNATE 19 -- 443
CITY-ST-ZIP DUNEDIN FL 34698

☐ Delete

TITLE D
NAME POWELL, THELMA
STREET ADDRESS 3301 ALT 19N 716
CITY-ST-ZIP DUNEDIN, FL. 34698

☐ Change

☒ Addition

TITLE VD
NAME STRATTON, NORMA
STREET ADDRESS 3301 ALTERNATE 19 - 128
CITY-ST-ZIP DUNEDIN FL

☐ Delete

TITLE D
NAME KLOKNER, BERNITA
STREET ADDRESS 3301 ALT. 19N 710
CITY-ST-ZIP DUNEDIN, FL. 34698

☐ Change

☒ Addition

TITLE TD
NAME SARVER, SPENCER
STREET ADDRESS 3301 ALTERNATE 19-510
CITY-ST-ZIP DUNEDIN FL

☐ Delete

TITLE D
NAME YANARELLA, ROBERT
STREET ADDRESS 3301 ALT. 19 N 615
CITY-ST-ZIP DUNEDIN, FL. 34698

☐ Change

☒ Addition

TITLE D
NAME LEBLANC, NORMAN
STREET ADDRESS 3301 ALTERNATE 19-317
CITY-ST-ZIP DUNEDIN FL

☐ Delete

TITLE D
NAME REES, JOHN
STREET ADDRESS 3301 ALT 19N 125
CITY-ST-ZIP DUNEDIN, FL. 34698

☐ Change

☒ Addition

TITLE SD
NAME LENARD, MARGARET
STREET ADDRESS 3301 ALTERNATE 19 -- 512
CITY-ST-ZIP DUNEDIN FL 34698

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME WALTERS, GEORGE
STREET ADDRESS 3301 ALTERNATE 19-606
CITY-ST-ZIP DUNEDIN FL

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ 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:

SPENCER SARVER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/2000 727-786-2441

Date

Daytime Phone #

CR2E034 (9/99)