

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

FILED
May 08, 2003 8:00 am
Secretary of State

05-08-2003 90174 042 ****61.25

DOCUMENT # N00000005723

1. Entity Name
MARKHAM OAKS HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**1749 CEDAR STONE COURT
LAKE MARY FL 32746**

Mailing Address
**1749 CEDAR STONE COURT
LAKE MARY FL 32746**



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

1707 CEDAR STONE COURT

3. Mailing Address

1707 CEDAR STONE CT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

LAKE MARY FL

City & State

LAKE MARY FL

Zip

Country

32746

Zip

Country

32746

4. FEI Number **59-3668647**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**FRESQUEZ, LUIS R
1749 CEDAR STONE COURT
LAKE MARY FL 32746**

7. Name and Address of New Registered Agent

Name **MICHAEL F. McARDLE**

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

1707 CEDAR STONE CT

City

LAKE MARY

FL

Zip Code

32746

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-26-03

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	PD	<input checked="" type="checkbox"/> Delete
NAME	FRESQUEZ, LUIS R	
STREET ADDRESS	1749 CEDAR STONE CT	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE	VPD	<input checked="" type="checkbox"/> Delete
NAME	HERRING, FRED	
STREET ADDRESS	1748 CEDAR STONE CT	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	TAYLOR, BARBARA	
STREET ADDRESS	1730 CEDAR STONE CT	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	SHURLEY, CAREY	
STREET ADDRESS	1755 CEDAR STONE COURT	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICHAEL F. McARDLE	
STREET ADDRESS	1707 CEDAR STONE CT	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT P. CHOR	
STREET ADDRESS	1731 CEDAR STONE CT	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KIM WAXMAN	
STREET ADDRESS	1713 CEDAR STONE CT	
CITY-ST-ZIP	LAKE MARY FL 32746	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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 **REQUIRED: McARDLE**

4-26-03

407-622-0029

CR2E037 (10/02)