

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N00000005805

1. Entity Name

RIVENDELL HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3026 S.W. 41ST LANE
OCALA FL 34474

3026 S.W. 41ST LANE
OCALA FL 34474

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

59-3250872

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

WHITFIELD, WILLIAM H
4105 S.W. 30TH COUT
OCALA FL 34474

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 WILLIAM H. WHITFIELD

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	<input checked="" type="checkbox"/> Delete
NAME	YOUNG, LARRY	
STREET ADDRESS	2932 SW 41ST PLACE	
CITY-ST-ZIP	OCALA FL 34474	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	PREDNERGAST, VICKI	
STREET ADDRESS	3057 SW 41ST PLACE	
CITY-ST-ZIP	OCALA FL 34474	
TITLE	TD	<input type="checkbox"/> Delete
NAME	WHITFIELD, WILLIAM H	
STREET ADDRESS	4105 SW 30TH COURT	
CITY-ST-ZIP	OCALA FL 34474	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DALEY, JIM	
STREET ADDRESS	3050 SW 41ST LANE	
CITY-ST-ZIP	OCALA FL 34474	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SNIVELY, DON	
STREET ADDRESS	3009 SW 41ST LANE	
CITY-ST-ZIP	OCALA FL 34474	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BICE, JEAN	
STREET ADDRESS	4123 SW 30TH COURT	
CITY-ST-ZIP		
TITLE	S	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRENDERGAST, VICKI	
STREET ADDRESS	3057 41ST PLACE	
CITY-ST-ZIP	OCALA, FL 34474	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	VITALE, TONY	
STREET ADDRESS	3063 SW 41ST PLACE	
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ASHLOCK, GARY	
STREET ADDRESS	3068 SW 41ST LANE	
CITY-ST-ZIP	OCALA, FL 34474	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BARTON, BETTY	
STREET ADDRESS	3020 SW 41ST LANE	
CITY-ST-ZIP	OCALA, FL 34474	

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:

WILLIAM H. WHITFIELD

WILLIAM H. WHITFIELD

1/7/2002

352-861-4832

FILED
Jan 09, 2002 8:00 am
Secretary of State

01-09-2002 90010 008 ****61.25



DO NOT WRITE IN THIS SPACE

0087602

CP2E037 (9/01)

Attachment
B0000793

Doc # N00000005865

PD BICE, JEAN
VP D VITALE, TONY
D BARTON, BETTY
S PRETERGAST, VICKI
T D WILLIAM H. WHITFIELD
D ASHLOCK, GARY

NEWLY ELECTED OFFICERS
DECEMBER 6, 2001 FOR
YEAR 2002 +