2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 11, 2002 8:00 am
Secretary of State
09-11-2002 90062 016 ****61.25

DOCUMENT # N00485

1. Entity Name

NORTHSHIRE DEVELOPMENT PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3491-11 THOMASVILLE RD STE 153 TALLAHASSEE FL 32308	3491-11 THOMASVILLE RD STE 153 TALLAHASSEE FL 32308

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Pickwick Rd	PO BOX 13653
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Tallahassee FL	City & State: Tallahassee FL
Zip: 32309 Country: LEON	Zip: 32317-3653 Country: LEON

4. FEI Number 59-2650461 ☐ 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
DAVIS, WILLIAM 6075 WESSIX CT TALLAHASSEE FL 32308	Name: TONI PERRIN Street Address (P.O. Box Number is Not Acceptable): 6120 PICKWICK Rd City: Tallahassee FL Zip Code: 32309

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: Toni Perrin TONI PERRIN 9/10/02

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D YODER, MEL 6160 PICKNICK RD TALLAHASSEE FL 32308	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WILLIAM DAVIS 6075 WESSEX COURT TALLAHASSEE FL 32308	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	KEITH JORDAN 6036 Pickwick Rd Tallahassee, FL 32309	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PERRIN, THOMAS 6120 PICKWICK RD TALLAHASSEE FL 32308	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CALPINI, JOHN 8064 TENNYSON DR TALLAHASSEE FL 32308	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Jeff Crew 8107 Tennyson Dr. Tallahassee FL 32309	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: SIGNATURE REQUIRED Toni Perrin TONI PERRIN 9/10/02 (850) 222 1875

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #