

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

FILED
Feb 18, 2003 8:00 am
Secretary of State

02-18-2003 90112 050 ****61.25

DOCUMENT # N00811

1. Entity Name

OSPREY CREEK HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

~~400 TONEY PANNA DRIVE~~
~~JUPITER FL 33458~~
US

~~400 TONEY PANNA DRIVE~~
~~JUPITER FL 33458~~
US

2. Principal Place of Business

1930 Commerce Ln

3. Mailing Address

1930 Commerce Ln #1

Suite, Apt. #, etc.

#1

Suite, Apt. #, etc.

City & State

Jupiter FL

City & State

Jupiter FL

Zip

33458

Country

Zip

33458

Country

USA

4. FEI Number **59-2382041**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

BRISTOL MANAGEMENT SERVICES, INC.
1930 COMMERCE LANE
SUITE 1
JUPITER FL 33458

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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 Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE **SD** Delete
NAME **COLLORADO, PAT.**
STREET ADDRESS **3954 SW OSPESY CREEK WAY**
CITY-ST-ZIP **PALM CITY FL 34990**

TITLE **PD** Delete
NAME **MCGUIRE, JEAN**
STREET ADDRESS **3934 SW OSPREY CREEK WAY**
CITY-ST-ZIP **PALM CITY FL 34990**

TITLE **DD** Delete
NAME **PAIGHT, RALPH**
STREET ADDRESS **3833 SW OSPRAY CREEK WAY**
CITY-ST-ZIP **PALM CITY FL 34990**

TITLE **TD** Delete
NAME **COHEN, INGRID**
STREET ADDRESS **3794 SW OSPRAY CREEK WAY**
CITY-ST-ZIP **PALM CITY FL 34990**

TITLE **D** Delete
NAME **FIORDA, ANNA**
STREET ADDRESS **3984 SW OSPREY CREEK WAY**
CITY-ST-ZIP **PALM CITY FL 34990**

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** Change Addition
NAME **JANET DE NIGELS**
STREET ADDRESS **4144 SW Osprey Creek Way**
CITY-ST-ZIP **Palm City, FL 34990**

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Change Addition
NAME
STREET ADDRESS
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CITY-ST-ZIP

TITLE Change 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: SIGNATURE REQUIRED

CR2E037 (10/02)