

# 2002 UNIFORM BUSINESS REPORT (UBR)

0006607

DOCUMENT # N01000000153

1. Entity Name

CANNON HEIGHTS - PHASE TWO OWNER'S ASSOCIATION, INC.

Principal Place of Business

Mailing Address

11635 N.W. 1ST AVENUE  
GAINESVILLE FL 32607

11635 N.W. 1ST AVENUE  
GAINESVILLE FL 32607

FILED

02 APR 16 PM 12:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

☒ 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

CURTIS, JOHN M JR.  
11635 N.W. 1ST AVENUE  
GAINESVILLE FL 32607

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

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  
NAME CURTIS, JOHN M SR.  
STREET ADDRESS 11635 N.W. 1ST AVENUE  
CITY-ST-ZIP GAINESVILLE FL 32607 ☐ Delete

TITLE D  
NAME Curtis, John M. Sr.  
STREET ADDRESS 11635 N.W. 1st Avenue  
CITY-ST-ZIP Gainesville, FL 32607 ☒ Change ☐ Addition

TITLE STD  
NAME CURTIS, GAIL W  
STREET ADDRESS 11635 N.W. 1ST AVENUE  
CITY-ST-ZIP GAINESVILLE FL 32607 ☒ Delete

TITLE PD  
NAME Holbrooks, E.A.  
STREET ADDRESS 847 Milondale Rd.  
CITY-ST-ZIP Macclenny, FL 32063 ☐ Change ☒ Addition

TITLE VD  
NAME RHODEN, THOMAS R  
STREET ADDRESS 515 SOUTH 6TH STREET  
CITY-ST-ZIP MACCLENNY FL 32063 ☒ Delete

TITLE VD  
NAME Kett, Kevin  
STREET ADDRESS 6794 E. Smooth Bore Avenue  
CITY-ST-ZIP Glen St. Mary, FL 32040 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE SD  
NAME Dougherty, Karen  
STREET ADDRESS 6742 E. Smooth Bore Avenue  
CITY-ST-ZIP Glen St. Mary, FL 32040 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE TD  
NAME Withey, Hunt  
STREET ADDRESS 7131 W. Smooth Bore Avenue  
CITY-ST-ZIP Glen ST. Mary, FL 32040 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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**

John M. Curtis  
Director

4/10/02

352-332-0838

CR2E037 (9/01)

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\*\*\*\*\*70.00 \*\*\*\*\*70.00