

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # NO1000001140

1. Entity Name

ALAFAYA COMMONS PROPERTY OWNERS' ASSOCIATION, INC.

FILED

02 MAY 21 AM 11:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

2221 LEE RD., STE. 28
WINTER PARK FL 32789

2221 LEE RD., STE. 28
WINTER PARK FL 32789

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

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

CORPORATION COMPANY OF MIAMI

1500 MIAMI CENTER
201 S. BISCAYNE BLVD.
MIAMI FL 33131

Name

Salvador F. Leccese

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

2221 Lee Road

Suite 28

City

Winter Park

FL

Zip Code

32789

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

Salvador F. Leccese

Salvador F. Leccese Dir.

4-17-02

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 D
NAME MCCOSKEY, TIM
STREET ADDRESS 2221 LEE RD., STE. 28
CITY-ST-ZIP WINTER PARK FL 32789 ☒ Delete

TITLE D
NAME Salvador F. Leccese
STREET ADDRESS 2221 Lee Rd, Suite 28
CITY-ST-ZIP Winter Park, FL 32789 ☐ Change ☒ Addition

TITLE D
NAME GROSCH, FRANK K
STREET ADDRESS 2221 LEE RD., STE. 28
CITY-ST-ZIP WINTER PARK FL 32789 ☐ Delete

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

TITLE D
NAME REESE, ROBERT B
STREET ADDRESS P.O. BOX 478
CITY-ST-ZIP WINTER PARK FL 32790-0478 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME 000005431280-16
STREET ADDRESS -05/02/02--01038--026
CITY-ST-ZIP *****555.00 *****70.00 ☐ 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

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: *Frank K. Grosch* 4/12/02 (407) 695-5575
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/01)