

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N01000008379

FILED
Apr 26, 2002 8:00 AM
Secretary of State

Entity Name: ROBERTS INDUSTRIAL PARK OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

101 ROBERTS ROAD
LAKE HAMILTON, FL 33851

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 915
LAKE HAMILTON, FL 33851

New Mailing Address:

POST OFFICE BOX 334
LAKE HAMILTON, FL 33851

FEI Number: 01-0589475

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, JO ANN
101 ROBERTS ROAD
LAKE HAMILTON, FL 33851

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Change (X) Addition
Name: ROBERTS, DONALD D
Address: 8000 LAKE HATCHINEHA RD
City-St-Zip: HAINES CITY, FL 33844

Title: VSTD () Change (X) Addition
Name: ROBERTS, JO ANN
Address: 8000 LAKE HATCHINEHA RD
City-St-Zip: HAINES CITY, FL 33844

Title: D () Change (X) Addition
Name: SURRENCY, TERRI J
Address: 1 PINE RUN
City-St-Zip: HAINES CITY, FL 33844

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JO ANN ROBERTS

STVD

04/26/2002

Electronic Signature of Signing Officer or Director

Date