

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

FILED
Feb 24, 2003 8:00 am
Secretary of State

02-24-2003 90949 027 ****61.25

DOCUMENT # N01296

1. Entity Name

C.A.V. HOMEOWNERS COOPERATIVE, INC.



Principal Place of Business

**39333 BLUE SKYE DRIVE
ZEPHYRHILLS FL 33540**

Mailing Address

**39333 BLUE SKYE DRIVE
ZEPHYRHILLS FL 33540**

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 **59-2515418**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**MANVILLE, IRVING
39231 RECESS DRIVE
ZEPHYRHILLS FL 33540**

7. Name and Address of New Registered Agent

Name **RONALD E. CROSBY-PRESIDENT**

Street Address (P.O. Box Number is Not Acceptable)
39248 MAHER DR.

City **ZEPHYRHILLS,**

FL

Zip Code
33542

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  **RONALD E. CROSBY-PRESIDENT** **2/19/2003**

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 **P** ☒ Delete
NAME **MANVILLE, IRVING**
STREET ADDRESS **39231 RECESS DRIVE**
CITY-ST-ZIP **ZEPHYRHILLS FL 33540**

TITLE **VP** ☐ Delete
NAME **CROSBY, RONALD**
STREET ADDRESS **39248 MAHER RD**
CITY-ST-ZIP **ZEPHYRHILLS FL 33540**

TITLE **S** ☐ Delete
NAME **JOHNSTONE, LEELAND E**
STREET ADDRESS **6231 BALMY LN**
CITY-ST-ZIP **ZEPHYRHILLS FL 33540**

TITLE **T** ☒ Delete
NAME **NAGEL, THENA**
STREET ADDRESS **6340 BALMY LN**
CITY-ST-ZIP **ZEPHYRHILLS FL**

TITLE **D** ☐ Delete
NAME **BUIRLEY, EVELYN**
STREET ADDRESS **6235 PLEASURE LANE**
CITY-ST-ZIP **ZEPHYRHILLS FL 33540**

TITLE **D** ☐ Delete
NAME **STREETER, NELSON**
STREET ADDRESS **6239 PARKSEND LANE**
CITY-ST-ZIP **ZEPHYRHILLS FL 33540**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Change ☐ Addition
NAME **RONALD E. CROSBY**
STREET ADDRESS **39248 MAHER DR.**
CITY-ST-ZIP **ZEPHYRHILLS, FL. 33542**

TITLE **VP** ☒ Change ☐ Addition
NAME **EVELYN BUIRLEY**
STREET ADDRESS **6235 PLEASURE LN.**
CITY-ST-ZIP **ZEPHYRHILLS, FL. 33542**

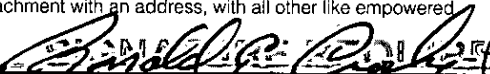
TITLE **T** ☒ Change ☐ Addition
NAME **NELSON STREETER**
STREET ADDRESS **6239 PARKSEND LN.**
CITY-ST-ZIP **ZEPHYRHILLS, FL. 33542**

TITLE **D** ☐ Change ☒ Addition
NAME **ANNE JORGENSEN**
STREET ADDRESS **39240 NANIAN DR.**
CITY-ST-ZIP **ZEPHYRHILLS, FL. 33542**

TITLE **D** ☐ Change ☒ Addition
NAME **DON McDANIEL**
STREET ADDRESS **39248 DONIGIAN DR.**
CITY-ST-ZIP **ZEPHYRHILLS, FL. 33542**

TITLE **D** ☐ Change ☒ Addition
NAME **DICK VANWIENEN**
STREET ADDRESS **6327 WEALTHY LN.**
CITY-ST-ZIP **ZEPHYRHILLS, FL. 33542**

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:  **President/Ronald E. Crosby- 2/19/03 813-782-8270**

CR2E037 (10/02)