

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

**FILED**  
**Jun 30, 2003 8:00 am**  
**Secretary of State**

06-30-2003 90069 031 \*\*\*\*61.25

**DOCUMENT # N02000006876**

1. Entity Name

ROCKWOOD HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business

225 SOUTH MAIN ST.  
WILLISTON FL 32696

Mailing Address

225 SOUTH MAIN ST.  
WILLISTON FL 32696

2. Principal Place of Business

2605 SW 33<sup>RD</sup> ST

3. Mailing Address

SAME AS

Suite, Apt. #, etc.

Ste 104

Suite, Apt. #, etc.

PLACE OF

City & State

Ocala, FL

City & State

Business

Zip

Country

34474 USA

Zip

Country

4. FEI Number

56-2368508

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

SIMMONS, GREGORY  
225 SOUTH MAIN ST.  
WILLISTON FL 32696

7. Name and Address of New Registered Agent

Name

GREGORY SIMMONS

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

2605 SW 33<sup>RD</sup> ST - Ste 104

City

Ocala

FL

Zip Code

34474

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

J. Gregory Simmons

6/27/03

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 D ☐ Delete  
NAME MUNDTEN, DANIEL R  
STREET ADDRESS 225 SOUTH MAIN ST.  
CITY-ST-ZIP WILLISTON FL 32696

TITLE D ☐ Delete  
NAME SIMMONS, JAMES G  
STREET ADDRESS 225 SOUTH MAIN ST.  
CITY-ST-ZIP WILLISTON FL 32696

TITLE D ☐ Delete  
NAME MOORE, TERESA E.  
STREET ADDRESS 225 SOUTH MAIN ST.  
CITY-ST-ZIP WILLISTON FL 32696

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DANIEL R MUNDTEN ☒ Change ☐ Addition  
NAME 2605 SW 33<sup>RD</sup> ST, Ste 104  
STREET ADDRESS Ocala, FL 34474  
CITY-ST-ZIP

TITLE JAMES G SIMMONS ☒ Change ☐ Addition  
NAME 2605 SW 33<sup>RD</sup> ST, Ste 104  
STREET ADDRESS Ocala, FL 34474  
CITY-ST-ZIP

TITLE TERESA E MOORE ☒ Change ☐ Addition  
NAME 2605 SW 33<sup>RD</sup> ST, Ste 104  
STREET ADDRESS Ocala, FL 34474  
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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: J. Gregory Simmons REQUIRED: GREGORY SIMMONS 3/5/03 352-854-0169

CR2E037 (10/02)