

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 13, 2001 8:00 am
Secretary of State
04-13-2001 90014 008 ****61.25

DOCUMENT # N02770

1. Entity Name

HONEYTREE NORTH GARDEN HOMES HOMEOWNERS ASSOCIAT

Principal Place of Business

**949 BUTTERCUP DR.
LAKELAND FL 33801**

Mailing Address

**949 BUTTERCUP DRIVE
LAKELAND FL 33801
US**

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

59-2450473

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

**ELLIS, BEVERLY
949 BUTTERCUP DRIVE
LAKELAND FL 33801**

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 **P** ☐ Delete
NAME **BROWN, SHARON S**
STREET ADDRESS **913 BUTTERCUP DRIVE**
CITY-ST-ZIP **LAKELAND FL 33801**

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

TITLE **V** ☐ Delete
NAME **HAYES, JANET**
STREET ADDRESS **844 BUTTERCUP DR**
CITY-ST-ZIP **LAKELAND FL 33801**

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

TITLE **ST** ☐ Delete
NAME **ELLIS, BEVERLY**
STREET ADDRESS **949 BUTTERCUP DR**
CITY-ST-ZIP **LAKELAND FL**

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

TITLE **D** ☒ Delete
NAME **LIBURD, ALEXANDER**
STREET ADDRESS **2234 BUTTERCUP CT**
CITY-ST-ZIP **LAKELAND FL**

TITLE ☒ Change ☐ Addition
NAME **D MILLER, STEVEN**
STREET ADDRESS **922 BUTTERCUP DR.**
CITY-ST-ZIP **LAKELAND, FL. 33801**

TITLE **D** ☐ Delete
NAME **HOWELL, WALTER**
STREET ADDRESS **937 BUTTERCUP DRIVE**
CITY-ST-ZIP **LAKELAND FL**

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

TITLE **D** ☐ Delete
NAME **MONACO, ROBERT**
STREET ADDRESS **853 BUTTERCUP DRIVE**
CITY-ST-ZIP **LAKELAND FL**

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: **SIGNATURE REQUIRED BEVERLY ELLIS**

4/12/01

(813) 666-3998

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)