

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Feb 18, 2000 8:00 am**  
**Secretary of State**

02-18-2000 90003 001 \*\*\*661.25

**DOCUMENT # N03474**

1. Entity Name

**CLEARY COURT PROPERTY OWNERS' ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

5950 HAZELTINE NATIONAL DR  
 SUITE 450  
 ORLANDO FL 32822  
 US

10 SOUTH SIXTH STREET  
 RICHMOND VA 23219-3843

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

**65-0034856**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND RD.**  
**PLANTATION FL 33324**

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: PD  Delete  
 NAME: LAMPERSKI, WALTER J  
 STREET ADDRESS: 2100 POWERS FERRY RD., #350  
 CITY-ST-ZIP: ATLANTA GA 30339

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

TITLE: VD  Delete  
 NAME: SURFACE, KATHERYN E  
 STREET ADDRESS: 10 SOUTH SIXTH STREET  
 CITY-ST-ZIP: RICHMOND VA 23219

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

TITLE: TD  Delete  
 NAME: FLANAGAN, JAMES T  
 STREET ADDRESS: 10 SOUTH SIXTH STREET  
 CITY-ST-ZIP: RICHMOND VA 23219

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

TITLE: SD  Delete  
 NAME: FULBRIGHT, TERRY  
 STREET ADDRESS: 2100 POWERS FERRY RD., #350  
 CITY-ST-ZIP: ATLANTA GA 30339

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

TITLE:  Delete  
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 STREET ADDRESS:  Delete  
 CITY-ST-ZIP:  Delete

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 CITY-ST-ZIP:  Delete

TITLE:  Change  Addition  
 NAME:  Change  Addition  
 STREET ADDRESS:  Change  Addition  
 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: *Katheryn E. Surface* Katheryn E. Surface, Vice President 1/28/00 804-780-269