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

DOCUMENT # N05007

1. Entity Name



FILED Feb 21, 2003 8:00 am Secretary of State 02-21-2003 90198 019 ****61.25

INC.	OWN DEVELOPMENT CORPOR	ation of Brooks	VILLE,		!				
Principal Place of Business Mailing Address 11 NORTH MAIN STREET 11 NORTH MAIL BROOKSVILLE FL 34601 BROOKSVILLE I			 -						
2. Principal	Place of Business	3. Mailing Address	- ')				
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.	• • • • • • • • • • • • • • • • • • • •		. \square	CHECK HERE IF	MAKING CHANGES	5	
City & Sta	ite	City & State		14 m	4. FEI Number			pplied For]
Zip	Country	Zip	Country		5. Certificate of S	Status Desired		ot Applicable	$\left\{ \right.$
	6. Name and Address of Current Re	gistered Agent				Idress of New Reg	Fee Require	ed	1
		3	Name	0 0					1
	N, JENNENE T	1	Street A	KoB ddress ∫P	O. Box Number is	Not Acceptable)	<u>. </u>	<u> </u>	
	th Broad Street Sville Fl 34601			<i>N</i> ·	MAIN	51KEE:	<i></i>		l
Divolic	WILL I'S OTOO!		City	60 KJ	VILLE		FL Zip Coo	de	
8. The above	e named entity submits this statement for the	ne purpose of changing its re	egistered office or	reaistere	d agent, or both, in	the State of Florid		and accept	ł
the obliga	tions of registered agent.		5			,		and accept	
SIGNATURE	Leb Horse		·			2/19/03	•		
	Signature, typed or printed name of registered agent and	title if applicable. (NOTE:	Registered Agent signatu	re required w	vhen reinstating)	· / · · / · ·	DATE	 -	
9	FILE NOW: FEE IS \$61.25	9. Election Camp Trust Fund Co			\$5.00 May Be	Make	Check Payable	to	-
7 4 4		I		_ ′	-100C0 10 1 CC3	Fioriua	Department of	State	
10.	OFFICERS AND DIREC	CTORS	11.	_					
TITLE	OFFICERS AND DIRECT	CTORS Delete	11.	_			AND DIRECTORS IN Change		(60)
TITLE NAME STREET ADDRESS	PD NORMAN, JENNENE T 20 SOUTH BROAD STREET		TITLE NAME STREET ADDRESS	_			AND DIRECTORS IN	l 10	37 (10/02)
TITLE, Name Street address City-St-Zip	PD NORMAN, JENNENE T 20 SOUTH BROAD STREET BROOKSVILLE FL 34601	Delete .	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_			AND DIRECTORS IN Change	J 10. Addition	2E037 (10/02)
TITLE NAME STREET ADDRESS	PD NORMAN, JENNENE T 20 SOUTH BROAD STREET BROOKSVILLE FL 34601 TD GARY, MARY BETH		TITLE NAME STREET ADDRESS	_			AND DIRECTORS IN	l 10	CR2E037 (10/02)
TITLE, NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD NORMAN, JENNENE T 20 SOUTH BROAD STREET BROOKSVILLE FL 34601 TD GARY, MARY BETH 18 NORTH BROAD STREET	Delete .	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	_			AND DIRECTORS IN Change	J 10. Addition	CR2E037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NORMAN, JENNENE T 20 SOUTH BROAD STREET BROOKSVILLE FL 34601 TD GARY, MARY BETH 18 NORTH BROAD STREET BROOKSVILLE FL 34601	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	_			AND DIRECTORS IN Change	Addition Addition	CR2E037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME	PD NORMAN, JENNENE T 20 SOUTH BROAD STREET BROOKSVILLE FL 34601 TD GARY, MARY BETH 18 NORTH BROAD STREET BROOKSVILLE FL 34601 SD WEVER, LAURA	Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	_			AND DIRECTORS IN Change	J 10. Addition	CR2E037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS	PD NORMAN, JENNENE T 20 SOUTH BROAD STREET BROOKSVILLE FL 34601 TD GARY, MARY BETH 18 NORTH BROAD STREET BROOKSVILLE FL 34601 SD WEVER, LAURA 100 NORTH BROOKSVILLE AVENUE	Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	_			AND DIRECTORS IN Change	Addition Addition	CR2E037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP	PD NORMAN, JENNENE T 20 SOUTH BROAD STREET BROOKSVILLE FL 34601 TD GARY, MARY BETH 18 NORTH BROAD STREET BROOKSVILLE FL 34601 SD WEVER, LAURA	Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	_			AND DIRECTORS IN Change	Addition Addition Addition	CB2E037 (10/02)
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS VITY-ST-ZIP TITLE VAME VAME VAME VAME VAME VAME VAME VAM	PD NORMAN, JENNENE T 20 SOUTH BROAD STREET BROOKSVILLE FL 34601 TD GARY, MARY BETH 18 NORTH BROAD STREET BROOKSVILLE FL 34601 SD WEVER, LAURA 100 NORTH BROOKSVILLE AVENUE BROOKSVILLE FL 34601 D BUCKNER, ROBERT 11 NORTH MAIN STREET	Delete Delete Delete Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	_			AND DIRECTORS IN Change Change Change	Addition Addition Addition	CB0F037 (10/09)
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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:

TO THE REQUIRED

2/18/03 352-796-1444