

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

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90212 031 ****61.25

DOCUMENT # N06280

1. Entity Name

TERRA MAR VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

P.O. BOX 303
EDGEWATER FL 32132

Mailing Address

P.O. BOX 303
EDGEWATER FL 32132

11015570



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 **59-2516358**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

KLEIN, LOREN R
4332 WHITING WAY
EDGEWATER FL 32141

7. Name and Address of New Registered Agent

Name **HANSEN, CLAUDIA P.**
Street Address (P.O. Box Number is Not Acceptable)
149 INDIAN RIVER DR. N
City **Edgewater** FL Zip Code **32141**

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 *Claudia P. Hansen* *April 10, 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	D	<input type="checkbox"/> Delete
NAME	KOROVAS, CHRISTO	
STREET ADDRESS	4337 INDIAN RIVER DRIVE W	
CITY-ST-ZIP	EDGEWATER FL 32141	
TITLE	DP	<input type="checkbox"/> Delete
NAME	KLEIN, LOREN R	
STREET ADDRESS	4332 WHITING WAY	
CITY-ST-ZIP	EDGEWATER FL 32141	
TITLE	D	<input type="checkbox"/> Delete
NAME	SANBORN, MARIE	
STREET ADDRESS	4336 INDIAN RIVER DRIVE W	
CITY-ST-ZIP	EDGEWATER FL 32141	
TITLE	DS	<input type="checkbox"/> Delete
NAME	SANDERS, DAVID	
STREET ADDRESS	4347 DOLPHIN WAY	
CITY-ST-ZIP	EDGEWATER FL 32141	
TITLE	DS	<input type="checkbox"/> Delete
NAME	SHCLACK, EVELYN	
STREET ADDRESS	4378 INDIAN RIVER DRIVE W	
CITY-ST-ZIP	EDGEWATER FL 32141	
TITLE	DT	<input type="checkbox"/> Delete
NAME	HANSEN, ROGER	
STREET ADDRESS	149 INDIAN RIVER DR. NORTH	
CITY-ST-ZIP	EDGEWATER FL 32141	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	DP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CLAUDIA P. HANSEN	
STREET ADDRESS	149 INDIAN RIVER DR. N	
CITY-ST-ZIP	Edgewater, FL 32141	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KOROVAS, CHRISTO	
STREET ADDRESS	4337 INDIAN RIVER DR. W	
CITY-ST-ZIP	Edgewater, FL 32141	
TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANBORN, MARIE	
STREET ADDRESS	4336 INDIAN RIVER DR. W	
CITY-ST-ZIP	Edgewater, FL 32141	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SANDERS, DAVID	
STREET ADDRESS	4347 Cedar Way	
CITY-ST-ZIP	Edgewater, FL 32141	
TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHLACK, EVELYN	
STREET ADDRESS	4378 INDIAN RIVER DR. W	
CITY-ST-ZIP	Edgewater, FL 32141	
TITLE	DVP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Schmidt Mike	
STREET ADDRESS	133 Pine Street	
CITY-ST-ZIP	Edgewater, FL 32141	

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: *S. Claudia P. Hansen* *4/10/03 386-345-1547*

CR2E037 (10/02)