

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

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 90484 019 ****61.25

DOCUMENT # N07008

1. Entity Name

REGENCY GREEN NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business

**2180 WEST SR 434
SUITE 5000
LONGWOOD FL 32779-5044**

Mailing Address

**2180 WEST SR 434
SUITE 5000
LONGWOOD FL 32779-5044**

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 **59-2557635**

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

**HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 S SR 434, STE. 5000
LONGWOOD FL 32779**

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	WIMBISH, GEORGE	
STREET ADDRESS	1279 REGENCY PLACE.	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	VD	☒ Delete
NAME	GOOD, BOB	
STREET ADDRESS	1282 REGENCY PL.	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	SD	☒ Delete
NAME	DANCE, KATHY	
STREET ADDRESS	1274 REGENCY PLACE	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	TD	☒ Delete
NAME	GIAMBRONE, MIMMA	
STREET ADDRESS	882 WINSFORD CT.	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	☒ P	☐ Delete
NAME	ARNOLD, MORRIE	
STREET ADDRESS	1226 E. LANGLEY CT.	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	D	☒ Delete
NAME	HYLA, JOHN	
STREET ADDRESS	348 ASHFORD CT.	
CITY-ST-ZIP	HEATHROW FL 32746	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VP	☐ Change ☒ Addition
NAME	JOHN MCKEE	
STREET ADDRESS	343 ASHFORD CT	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	S	☐ Change ☒ Addition
NAME	BECKY UHLEMAN	
STREET ADDRESS	1234 EAST LANGLEY CT	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	T	☐ Change ☒ Addition
NAME	JEAN FALCONETTI	
STREET ADDRESS	327 ASHFORD CT	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	D	☐ Change ☒ Addition
NAME	LEN GREENBAUM	
STREET ADDRESS	1227 EAST LANGLEY CT	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	D	☐ Change ☒ Addition
NAME	KEN MORSE	
STREET ADDRESS	1275 REGENCY PLACE	
CITY-ST-ZIP	HEATHROW FL 32746	
TITLE	D	☐ Change ☒ Addition
NAME	FRANK CERASOLI	
STREET ADDRESS	395 WINSFORD CT	
CITY-ST-ZIP	HEATHROW FL 32746	

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]

4-3-03

CR2E037 (10/02)