2000 UNIFORM BUSINESS REPORT (UBR)

3/1/00-90002-036-$61.25-$61.25

DOCUMENT # N08724

1. Entity Name

THE COLONIAL PINES HOME OWNERS ASSOCIATION, INC.

FILED

00 MAR 17 AM 11:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
COLONIAL PINES MOBILE APRK ASSC. NEVARRE FL 32566	PO BOX 6018 NAVARRE FL 32566-1618

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 NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GREGORY, MICHAEL
9856 W BRUNCER HILL CIR
NAVARRE FL 32566

Russell W. Holt
2135 Colonial Ave.
Navarre, FL 32566

7. Name and Address of New Registered Agent

Name: Russell W. Holt

Street Address (P.O. Box Number is Not Acceptable): 2135 Colonial Ave.

City: Navarre FL Zip Code: 32566

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: Russell W. Holt 3/12/00

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	CD COON, DORTHOY 9850 PRIMROSE CIR NAVARRE FL 32566	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VC LONG, ALICE 2115 MUSKET DR NAVARRE FL 32566	☒ Delete	TITLE VC / NAME / STREET ADDRESS / CITY-ST-ZIP	Bendus, Betty 9850 W. Bunker Hill Cir. Navarre, FL 32566	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S KULHAVIK, NANCY 2114 MUSKET DR NAVARRE FL 32566	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T GREGORY, MICHAEL 9856 W BUNKER HILL CIR NAVARRE FL 32566	☒ Delete	TITLE T / NAME / STREET ADDRESS / CITY-ST-ZIP	Holt, Russell W. 2135 Colonial Ave. Navarre, FL 32566	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS CHAREST, ROLENE 9880 JONQUIC CIR NAVARRE FL 32566	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT SWEAT, MARGARET 9879 JONQUIL CIR NAVARRE FL	☒ Delete	TITLE AT / NAME / STREET ADDRESS / CITY-ST-ZIP	Stevenson, Gene 2243 Colonial Ave. Navarre, FL 32566	☒ Change ☐ Addition TS

CR2E037 (9/99)

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #