2000 UNIFORM BUSINESS REPORT (UBR)

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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED **DOCUMENT # N08926** Mar 29, 2000 8:00 am 1. Entity Name **Secretary of State** COLONIAL COLONY SOUTH HOMEOWNERS ASSOCIATION, IN 03-29-2000 90080 048 ****61.25 Principal Place of Business Mailing Address 1290 MONTICELLO DR 1290 MONTICELLO DR DAYTONA BEACH FL 32119-1559 DAYTONA BEACH FL 32119-1559 040000 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2530239 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) JOHNSON, DONNA J. 1290 MONTICELLO DR DAYTONA BEACH FL 32119 City 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. DATE (NOTE: Registered Agent signature required when reinstating) Make Check Payable to **FILE NOW:** 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. Josephi NE STANKIEWICZ Change 1288 Monte Cello DR. Daytona Beach Fl 32119 TITLE 4 Addition TITLE ☐ Delete **BROOKS, CATHERINE** NAME NAME STREET ADDRESS STREET ADDRESS 1284 MONTICELLO DR CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32119 THOMAS beone Change Addition TITLE Delete TITLE 1266 PlanTATION Place GARDNER, KEN NAME NAME STREET ADDRESS STREET ADDRESS 1239 PLANTATION PLACE Daytona Beach Fl 32119 CITY-ST-ZIP CITY-ST-7IP DAYTONA BEACH FL JOSEPH KING Change Addition Delete TITLE TITLE NAME NAME SWIFT, EDNA 1304 BUNKERHILL DR. Daytona Beach F1 32119 STREET ADDRESS STREET ADDRESS 1262 VALLEY FORGE CITY-ST-7IP CITY-ST-ZIE DAYTONA BEACH FL 32119 LINDAFITCH ☐ Change DTVP Delete Addition TITLE TITLE 1279 CONSTITUTION DR. Johnson, Donna J. NAME NAME STREET ADDRESS STREET ADDRESS 1290 MONTICELLO DR Daytona Beach F1 32119 CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL EMMET ROBERTS Change Addition TITLE ☐ Delete TITLE \mathcal{T} 1276 Patriot Place STANKIEWICZ, JOSEPH NAME STREET ADDRESS 1288 MONTICELLO DR STREET ADDRESS Daytona Beach FI 32119 CITY-ST-7IP CITY-ST-ZIP DAYTONA BEACH FL TITLE ☐ Change ☐ Addition 📆 Nelete TITLE NAME EAGLE, JIM NAME 1267 PATRIOT PLACE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL 32119 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.

Date

Daytime Phone #