

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

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90777 029 *****61.25

DOCUMENT # N11000

1. Entity Name

WEST END VILLAS COMMUNITY ASSOCIATION, INC.



Principal Place of Business

**4400 NW 36TH AVENUE
GAINESVILLE FL 32606
US**

Mailing Address

**4400 NW 36TH AVENUE
GAINESVILLE FL 32606
US**

60025715



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2780039**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TRIPPE, PAT
4400 NW 36TH AVENUE
GAINESVILLE FL 32606**

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HINELY, MARY ANN 803 NW 125TH DRIVE NEWBERRY FL 32669	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD KIMLINGER, ROSE 1046 NW 125TH PLACE NEWBERRY FL 32669	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RICHARDSON, MAE 832 NW 129 DRIVE NEWBERRY FL 32669	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DOWNIE, RICHARD 1056 NW 124TH DRIVE NEWBERRY FL 32669	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KRAJICEK, MARTHA 1029 NW 124 DRIVE NEWBERRY FL 32669	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHOENLERR, WILLIAM 807 NW 125TH DR NEWBERRY FL 32669	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Downie, Richard 1056 NW 124 Drive Newberry, FL 32669	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Holbrook, Dorothy 825 NW 124 Drive Newberry, FL 32669	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Curasi, Janet 1050 NW 124 Drive Newberry, FL 32669	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD KRAJICK, Martha 1029 NW 124 Drive Newberry, FL 32669	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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
JANET CURASI 3/26/03 Secretary 323-7800 352

CR2E037 (10/02)