

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N11561

1. Entity Name

GULF TRACE HOMEOWNERS ASSOCIATION, INC.

FILED
Jan 13, 2000 8:00 am
Secretary of State

01-13-2000 90045 028 ****61.25

Principal Place of Business

3300 HEARTHSTONE CT.
HOLIDAY FL 34691
US

Mailing Address

PO BOX 3888
HOLIDAY FL 34690-0888
US

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

59-2898707

Applied For

Not Applicable

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

PEYTON, DONALD R
7317 LITTLE RD.
NEW PORT RICHEY FL 34654

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.

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DP ☒ Delete
NAME WALSH, MICHAEL J JR.
STREET ADDRESS 3300 HEARTHSTONE CT.
CITY-ST-ZIP HOLIDAY FL 34691

TITLE ☒ Change ☐ Addition
NAME DPT
NAME WALSH, MICHAEL J JR.
STREET ADDRESS 3300 HEARTHSTONE CT
CITY-ST-ZIP HOLIDAY FL 34691

TITLE VPD ☐ Delete
NAME TUDOR, CHARLES B
STREET ADDRESS 2805 BRAMBLE RIDGE CT
CITY-ST-ZIP HOLIDAY FL 34691

TITLE ☐ Change ☒ Addition
NAME D
NAME AYAN, MANUEL
STREET ADDRESS 3014 WESTRIDGE DRIVE
CITY-ST-ZIP HOLIDAY FL 34691

TITLE TD ☒ Delete
NAME HOLLOWAY, BARBARA D
STREET ADDRESS 2923 WINDRIDGE DR.
CITY-ST-ZIP HOLIDAY FL 34691

TITLE ☐ Change ☒ Addition
NAME D
NAME PETERS, THOMAS
STREET ADDRESS 2839 FEATHERSTONE COURT
CITY-ST-ZIP HOLIDAY FL 34691

TITLE SD ☐ Delete
NAME MURPHY, JEROME J
STREET ADDRESS 3307 GLENWOOD CIR
CITY-ST-ZIP HOLIDAY FL 34691

TITLE ☐ Change ☒ Addition
NAME D
NAME THOMAS, JANE M.
STREET ADDRESS 2832 WOOD ROSE COURT
CITY-ST-ZIP HOLIDAY FL 34691

TITLE D ☐ Delete
NAME GOBER, ROBERT
STREET ADDRESS 4031 ASHLEY COURT
CITY-ST-ZIP HOLIDAY FL 34691

TITLE ☐ Change ☒ Addition
NAME D
NAME EGLESTON, DAVID B.
STREET ADDRESS 3318 GLENWOOD CIRCLE
CITY-ST-ZIP HOLIDAY FL 34691

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME D
NAME TOSCANO, ANTHONY
STREET ADDRESS 3246 HEARTHSTONE CT
CITY-ST-ZIP HOLIDAY FL 34691

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 *Michael Walsh Jr.* MICHAEL J. WALSH JR.

6 JAN 00 (727) 943-9491

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)