

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N11642

1. Entity Name

VICTORIA STATION HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

3115 ALBERT CT.
PENSACOLA FL 32504
US

Mailing Address

3115 ALBERT CT.
PENSACOLA FL 32504
US

2. Principal Place of Business

3134 Station Ct

Suite, Apt. #, etc.

3. Mailing Address

3134 Station Ct

Suite, Apt. #, etc.

City & State

Pensacola FL

City & State

Pensacola FL

4. FEI Number

59-2804408

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOHNER, LYNN S
3115 ALBERT CT.
PENSACOLA FL 32504

7. Name and Address of New Registered Agent

Name: Pamela Kundrot
Street Address (P.O. Box Number is Not Acceptable)

3134 Station Ct

City: Pensacola

FL

32504

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

Pamela Kundrot TD

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/20/01

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

TITLE	SD	<input type="checkbox"/> Delete
NAME	CROWE, ELIZABETH	
STREET ADDRESS	3112 STATION CT	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	BOHNER, LYNN S	
STREET ADDRESS	3115 ALBERT CT.	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	KUNDROT, PAMELA	
STREET ADDRESS	3134 STATION CT	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	GREENE, EDDY	
STREET ADDRESS	3109 STATION CT	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Pamela Kundrot	
STREET ADDRESS	3134 Station Ct	
CITY-ST-ZIP	Pensacola FL 32504	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Robert Galvan	
STREET ADDRESS	3115 Albert Ct	
CITY-ST-ZIP	Pensacola FL 32504	
TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kathy Meehling	
STREET ADDRESS	3103 Station Ct	
CITY-ST-ZIP	Pensacola FL 32504	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Pamela Kundrot TD Pamela A Kundrot 7/20/01 850-429-9000

FILED
Aug 01, 2001 8:00 am
Secretary of State

08-01-2001 90200 013 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)