

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

FILED
May 05, 2003 8:00 am
Secretary of State

04-14-2003 90408 017 ****61.25

DOCUMENT # N13292

1. Entity Name
COLONY IN THE WOOD HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
**4000 SOUTH CLYDE MORRIS BLVD.
DAYTONA BEACH FL 32119**

Mailing Address
**4000 SOUTH CLYDE MORRIS BLVD.
DAYTONA BEACH FL 32119**

55037926

2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State **PORT ORANGE, FL** City & State **PORT ORANGE, FL**
Zip **32129** Country Zip **32129** Country

4. FEI Number **59-2891606** Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**LOB, MYRNA M
38 CEDAR IN THE WOOD
DAYTONA BEACH FL 32129**

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
PORT ORANGE, FL Zip Code **32129**

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 _____ (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	SD ZITER, FRAN 48 OAK IN THE WOOD DAYTONA BEACH FL 32129 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KAMMERER, PATRICIA 36 CEDAR IN THE WOOD PORT ORANGE, FL 32129 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KAMMERER, PATRICIA 36 CEDAR DAYTONA BEACH FL 32129 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P. FREEMAN, ARTHUR 16 PINE IN THE WOOD PORT ORANGE, FL 32129 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V RACO, TONY 34 OAK IN THE WOOD DAYTONA BEACH FL 32129 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SEC. OFFICER LINDA 23 CYPRESS IN THE WOOD PORT ORANGE, FL 32129 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LOB, MYRNA M 38 CEDAR IN THE WOOD DAYTONA BEACH FL 32129 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR. LOB, MYRNA 68 CEDAR IN THE WOOD PORT ORANGE, FL 32129 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	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: **Myrna M. Lob** **4-10-03** **386-756-6212**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/02)