2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2001 8:00 am
Secretary of State
01-24-2001 90088 041 ****61.25

DOCUMENT # N15694

1. Entity Name

GOLDEN PONDS OF FORT PIERCE HOMEOWNERS ASSOCIATI

Principal Place of Business	Mailing Address
~~1600 GOLDEN PONDS DR~~ ~~FT PIERCE FL 34945~~ US 10001 W. ANGLE RD FT. PIERCE, FL 34945	~~1600 GOLDEN POND DR~~ 10001 W. ANGLE RD FT PIERCE FL 34945 FT. PIERCE, FL. US 34945

DO NOT WRITE IN THIS SPACE

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 59-2807559 ☐ 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
~~CAMPBELL, REYBURN W. SR~~ ~~1747 BAR HARBOR DR.~~ ~~FT. PIERCE FL 34945~~ JERRY KIRK 10003 BAR HARBOR CT FT. PIERCE, FL 34945	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 JERRY KIRK
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KIRK, JERRY 10003 BAR HARBOR CT FORT PIERCE FL 34945	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP HUFCUT, ELOISE 1756 STONYBROOK DR FT. PIERCE FL 34945	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD OLLIS, MARY 1739 BAR HARBOR DR. FT. PIERCE FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREAS. MARILYN HAGIN 10111 MILL CREEK LA. FT. PIERCE, FL. 34945	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ATD CLARK, LEA 10107 GASLIGHT CT FORT PIERCE FL 34945	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP LEGREE, SUSAN 1844 GOLDEN PONDS DR FORT PIERCE FL 34945	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD DALY, EDWARD L 1735 WALDEN POND DR FT. PIERCE FL 34945	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/00)

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: JERRY KIRK 1-11-01 561-466-1949
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #