2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 16, 2001 8:00 am
Secretary of State
04-16-2001 90065 044 ****61.25

DOCUMENT # N16356

1. Entity Name

FOREST OAKS CIVIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
8101 FOREST OAKS BV SPRING HILL FL 34606	8101 FOREST OAKS BV SPRING HILL FL 34606

[redacted]

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 59-2713515 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

RYAN, ELIZABETH
5330 SPRING HILL DRIVE
SPRING HILL FL 34613

7. Name and Address of New Registered Agent

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P ROCCO, ROSE 8189 ENGLISH ELM CIRCLE SPRING HILL FL 34606	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SCHILL, NANCY 8019 WOODEN DRIVE SPRING HILL FL 34606	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director ALYCE CLARK 8184 PHILATELIC DRIVE Spring Hill, FL. 34606	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BETZ, BETTY 8085 ENGLISH ELM CIRCLE SPRING HILL FL 34606	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER Betty Betz 8085 English Elm Circle Spring Hill, FL. 34606	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S. STEWART, THERESA 8099 WOODEN DRIVE SPRING HILL FL 34606	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY Amelia Byrne 8039 Wooden Drive Spring Hill, FL. 34606	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SEIBEL, HELEN 8060 PHILATELIC DRIVE SPRING HILL FL 34606	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COLLIER, ANN 7347 ALLEN DRIVE SPRING HILL FL 34606	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director AL MITONE 8039 Wooden Drive Spring Hill, FL. 34606	☒ 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: X Signature Required 3-17-2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #