

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # N16743**

1. Entity Name

**VALLEY HILL FARMS HOMEOWNERS' ASSOCIATION, INC.****FILED**  
**Feb 26, 2001 8:00 am**  
**Secretary of State**

02-26-2001 90536 047 \*\*\*\*61.25

0023036

Principal Place of Business

Mailing Address

**34621 VALLEY HILL LANE**  
**EUSTIS FL 32736**  
**US****34621 VALLEY HILL LANE**  
**EUSTIS FL 32736**  
**US**

626704



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**NOT APPLICABLE**

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

**NELSON, ROBERT L**  
**34621 VALLEYHIL LN**  
**EUSTIS FL 32736**

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

*ROBERT L NELSON*

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

(NOTE: Registered Agent signature required when reinstating)

*2/18/01*

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP		TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	
	PD			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	FABIAN, GEORGE	34944 VALLEY HILL LANE	EUSTIS FL						
	VD			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	WHITE, DAVID	34952 VALLEY HILL LANE	EUSTIS FL						
	STD			<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
	NELSON, ROBERT L	34621 VALLEY HILL LANE	EUSTIS FL						
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> Addition
				<input type="checkbox"/> Delete					<input type="checkbox"/> Change <input type="checkbox"/> 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:

*ROBERT L NELSON*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*2/18/01*

Date

*352-589-1338*

Daytime Phone #

CR2E037 (10/00)