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

DOCUMENT # N16743

1. Entity Name

VALLEY HILL FARMS HOMEOWNERS' ASSOCIATION, INC.



FILED Jan 24, 2003 8:00 am Secretary of State

01-24-2003 90076 023 ****61.25

						V SON W	TREE					
Principal Place of Business 34621 VALLEY HILL LANE EUSTIS FL 32736 US				Mailing Address 34621 VALLEY HILL LANE EUSTIS FL 32736 US				, 	010 83HU F80U DIORE INU BUBU	a 14 44 817 41 8 1114 9 4	BJ1 BJ BJ J J BB	
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.					CHECK HERE IF MAKING CHANGES				
City & State			City & State					4. FEI Number NOT APPLICABLE			Applied For Not Applicable	
Zip Country			Zip=Country					5. Certificate of Status Desired				
6. Name and Address of Current F				egistered Agent				7. Name and Address of New Registered Agent				
						Name						
NELSON, ROBERT L 34621 VALLEYHIL LN EUSTIS FL 32736							Street Address (P.O. Box Number is Not Acceptable)					
Loono	C 02/00					City			F	L Zip Cod	e	
C The should	named entit	y submits this statement for	the purp	ose of changing its	registers	ed office or	register	ed agent or both in	the State of Florida Lar	m familiar with	and accept	
	ions of regist		ino purp	oss of chariging no	709.010.1					,		
SIGNATURE _	Signature, typed	or printed name of registered agent a	nd title if app	olicable. (NOTE	£: Registere	d Agent signati	ure required	when reinstating)	DATE			
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution.				\$5.00 May Be Added to Fees				
10.		OFFICERS AND DIR	ECTORS		11.			ADDITIONS/CHANG	ES TO OFFICERS AND I	DIRECTORS IN	l 10 🟒	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FABIAN, 0 34944 VA EUSTIS F	GEORGE LLEY HILL LANE		☐ Delete	TITLE NAMI STRE		PD HU8 346		AS HILL LANE	Change	Addition	E037 (10/02)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD White, D	AVID LLEY HILL LANE		Delete			JEA 3486	NETTE LEM	ERISE HILL LANG	☐ Change	Addition	CR2
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD NELSON,	ROBERT L LLEY HILL LANE		□ Delete						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		-		☐ Delete						☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Delete				ı		☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		a information supplied with	ALC PY	☐ Delete	CITY	ET ADDRESS - ST- ZIP		otion 440 07/0V/) T	noise Chapter - 1 h h	☐ Change	Addition	

indicated on this report or supplied with this filling does not qualify for the exemption stated in section 1.19.0 (3)(i), Florida statutes. Hother Certify that the information indicated on this report or suppliemental 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: