## 2003 NOT-FOR-PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR) **DOCUMENT # N20096** THE SAME

## Apr 28, 2003 8:00 am Secretary of State

)		04-28-2003
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RACQUET CIATION,	CLUB V	ILLAS AT HEATHRO	OW CON	Dominium As	SSO			(	J4-28-2003 90 <sup>4</sup>	184 018 ****	61.25	
Principal Place of Business 2180 W SR 434 STE 5000 SENTRY MANAGEMENT, INC. LONGWOOD FL 32779		2180 W Sentri	Mailing Address 2190 W SR 434 STE 5000 SENTRY MANAGEMENT. INC. LONGWOOD FL 32779									
2. Principal F	Place of Busir	ness	3. Maili	ing Address								
Suite, Apt. #, etc.			Sui	Suite, Apt. #, etc.				☐ CHECK HERE IF MAKING CHANGES				
City & State			City	City & State			_	) 33 23 120 <del>44</del>			Applied For Not Applicable	
Zip		Country	Zip		Co	untry		5. Certificate of St	atus Desired [	\$8.75 Fee Requ	Additional	
	6. Name	and Address of Current	Registere	d Agent				7. Name and Add	ress of New Regis	tered Agent		
						Name						
HART, JAMES W, JR 2180 W SR 434 STE 5000					•	Street Add	dress (F	O. Box Number is t	Not Acceptable)			
LONGWO	OOD FL 327	779			1	City				FL Zip C	ode	
		·				<u></u>				<u> </u>		
	e named entity tions of regist	y submits this statement for ered agent.	or the purpo	se of changing its	register	ed office or re	egistere	ed agent, or both, in	the State of Florida	I am familiar wi	th, and accept	
SIGNATURE .			-									
	oignature, typed	or printed name of registered agent	and title if appli	cable, (NOTE	: Registere	d Agent signature r	required v	when reinstating)		DATE		
1		: FEE IS \$61.25	and title if appli	9, Election Cam Trust Fund C	npaign f	inancing		\$5.00 May Be Added to Fees		Check Payab Department o		
10.				9. Election Can	npaign f	inancing	]	\$5.00 May Be Added to Fees	Florida D	Check Payab Department o	f State	
10,	FILE NOW	: FEE IS \$61.25		9. Election Can Trust Fund C	npaign F contribut	Financing ion.	] A	\$5.00 May Be Added to Fees DDITIONS/CHANG	Florida E	Check Payab Department o	f State	
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10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD BARWICK, 240 WIMB HEATHRO	OFFICERS AND DI BILL LEDON CIR W FL 32746		9. Election Can Trust Fund C	npaign Fiontribut  11. TITU NAM STRI CITY	E C C C C C C C C C C C C C C C C C C C	A PPD CHAI 231	\$5.00 May Be Added to Fees DDITIONS/CHANG PLES HIGH WIMBLEDO	ES TO OFFICERS A	Check Payab Department o	f State	
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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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: 🔽

235 WIMBLEDON CIR

**HEATHROW FL 32746** 

STREET ADDRESS

CITY-ST-ZIP

IAM A BALLICK

3-27-03