

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N24201

1. Entity Name

KISSIMMEE RIVER FISHING RESORT HOMEOWNERS ASSOCI

Principal Place of Business

Mailing Address

15601 SR 70 W LOT
OKEECHOBEE FL 34974

15601 SR 70 W LOT
OKEECHOBEE FL 34974

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0158536

Applied For

Not Applicable

Zip

Country

Zip

Country

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

WILLIAM O VINEYARD
15601 S.R. 70 W #62
OKEECHOBEE FL 34974

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
C
WILLIAM O VINEYARD
15601 SR 70 W #62
OKEECHOBEE FL 34974

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CAROL DORREL
15601 SR 70 W #94
OKEECHOBEE FL 34974

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
CAROL DORREL
15601 SR 70 W #94
OKEECHOBEE FL 34974

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
WRIGHT, GERALDINE
15601 SR 70 W., LOT 34
OKEECHOBEE FL 34974

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
T
BETTY R COFFEY
15601 SR 70 W #46
OKEECHOBEE FL 34974

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
KLINGLESSNITH, MIKE
15601 SR 70 W #22
OKEECHOBEE FL 34974

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP
PAUL YAKOVICH
15601 SR 70 W #95
OKEECHOBEE FL 34974

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
SERGLANT, DON
15601 SR 70 W 74
OKEECHOBEE FL 34974

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
VINEYARD, BILL
15601 SR 70 W #62
OKEECHOBEE FL 34974

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb. 5, 2001 863-467-0587
Date Daytime Phone #

FILED
Apr 03, 2001 8:00 am
Secretary of State

04-03-2001 90050 030 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (10/00)