

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N25532

1. Entity Name

BIG PINE ACRES MOBILE HOMEOWNERS ASSOCIATION, IN

FILED

Mar 06, 2000 8:00 am
Secretary of State

03-06-2000 90127 006 ****61.25

Principal Place of Business

Mailing Address

C/O GUILFORD MACDONALD
3290 W. PARKVILLE ST LOT #8
LECANTO FL 34461
US

C/O GUILFORD MACDONALD
3290 W PARKVILLE ST LOT #8
LECANTO FL 34461-7913
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2891437

☒ 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

WRIGHT, RICHARD
3290 W PARKVILLE STREET
LOT#9
LECANTO FL 34461

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

TITLE TD
NAME MACDONALD, GUILFORD
STREET ADDRESS 3290 W PARKVILLE STR, LOT 8
CITY-ST-ZIP LECANTO FL

☐ Delete

TITLE P
NAME WRIGHT, RICHARD
STREET ADDRESS 3290 W PARKVILLE ST LOT 9
CITY-ST-ZIP LECANTO FL

☐ Delete

TITLE D
NAME ENGLEMAN, GEORGE
STREET ADDRESS 3290 W PARKVILLE ST. LOT 34
CITY-ST-ZIP LECANTO FL

☒ Delete

TITLE D
NAME BOWEN, JOHN
STREET ADDRESS 3290 PARKVILLE ST., LOT 24
CITY-ST-ZIP LECANTO FL

☐ Delete

TITLE D
NAME LONGTINE, ROBERT
STREET ADDRESS 3290 W PARKVILLE ST #14
CITY-ST-ZIP LECANTO FL

☒ Delete

TITLE VP
NAME AURIN, WALTER
STREET ADDRESS 3290 W PARKVILLE ST LOT #17
CITY-ST-ZIP LECANTO FL 34461

☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE SD
NAME JACKSON
STREET ADDRESS 3290 W PARKVILLE ST LOT 18
CITY-ST-ZIP LECANTO FL 34461

☐ Change ☒ Addition

TITLE D
NAME HUM, DOUGLAS
STREET ADDRESS 3290 W PARKVILLE ST LOT 23
CITY-ST-ZIP LECANTO, FL 34461

☐ Change ☒ Addition

TITLE D
NAME PROCEX, MICHAEL
STREET ADDRESS 3290 W PARKVILLE ST. LOT 25
CITY-ST-ZIP LECANTO, FL 34461

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

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:

(W. RICHARD WRIGHT) SIGNED

3/3/00

902-527-0490

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)