2000 UNIFORM BUSINESS REPORT (UBR)

FILED **DOCUMENT # N30953** Feb 04, 2000 8:00 am 1. Entity Name **Secretary of State** TAMPA PALMS UNIT 4B OWNER'S ASSOCIATION, INC. 02-04-2000 90064 018 ****61.25 Principal Place of Business Mailing Address 7001 TEMPLE TERRACE HWY 7001 TEMPLE TERRACE HWY TEMPLE TERRACE FL 33637 TEMPLE TERRACE FL 33637-5734 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FFI Number City & State City & State 59-2939180 Not Applicable Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) MEZER, STEVEN H 1212 COURT ST. SUITE B Zip Code City FL **CLEARWATER FL 34616** 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW: Make Check Payable to 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. 10. ☐1 Change ☐ Addition ☐ Delete TITLE TITLE EDWARD, WILLIAM NAME NAME STREET ADDRESS 15841 SANCTUARY DRIVE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33647 ☐ Addition Change P/D Delete TITLE TITLE NAME WHITE .. ROBERT : NAME STREET ADDRESS STREET ADDRESS 15876 SANCTUARY DRIVE TAMPA FL 33647 --- -----CITY-ST-ZIP .CITY-ST-ZIP WILSON, MAbbie Fitzgerald Change 13808 Sanctuary Dr ☐ Addition D Delete TITLE TITLE NAME CONLEY, WILLIAM NAME STREET ADDRESS STREET ADDRESS 6007 FAIRWAY PALMS CT TAMPA, FT. 33647 CITY-ST-ZIP CITY-ST-ZIP **TAMPA FL 33647**. □ Change ☐ Addition αT Delete TITLE NAME HENNE, JOHN NAME STREET ADDRESS STREET ADDRESS 15807 SERENITY CIR. CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33647 ☐ Change ☐ Addition TITLE ☐ Delete NAME HENRIETTA, MARTIN NAME STREET ADDRESS STREET ADDRESS 15840 SANCTUARY DRIVE CITY-ST-ZIP CITY-ST-ZIP TAMPA FL 33647 ☐ Change ☐ Addition TITLE TITLE Delete 11797 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE: X SIGN

SIGNATURE REQUIRZO

changed, or on an attachment with an address, with all other like empowered.

1/14/2000

<u>813-977-3999</u>

Daytime Phone #