

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N32233

1. Entity Name

WHITE SANDS LAKE ASSOCIATION, INC.

FILED
Feb 06, 2002 8:00 am
Secretary of State

02-06-2002 90079 020 ****61.25

Principal Place of Business

Mailing Address

P.O. BOX 1395
KEYSTONE HEIGHTS FL 32656

P.O. BOX 1395
KEYSTONE HEIGHTS FL 32656

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2908374

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

WHALEN, MONICA
7076 BRIGHTWATER DRIVE
KEYSTONE HEIGHTS FL 32656

Name

Barker, Betty S.

Street Address (P.O. Box Number is Not Acceptable)

7072 Brightwater Dr.

City

Keystone Heights FL

Zip Code

32656

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 Betty S. Barker

Betty S. Barker

1-21-02

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 P
NAME PHILLIPS, SHERMAN ☒ Delete
STREET ADDRESS 7060 BRIGHTWATER DRIVE
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

TITLE P ☐ Change ☒ Addition
NAME Knapp, David
STREET ADDRESS 7044 Brightwater Dr.
CITY-ST-ZIP Keystone Heights, FL 32656

TITLE VD ☒ Delete
NAME KNAPP, DAVE
STREET ADDRESS 7044 BRIGHTWATER DRIVE
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

TITLE VP ☐ Change ☒ Addition
NAME David Payne
STREET ADDRESS 5927 County Rd 352
CITY-ST-ZIP Keystone Heights, FL 32656

TITLE S ☐ Delete
NAME FARRIS, DOT
STREET ADDRESS 5847 WHITE SANDS ROAD
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

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

TITLE TD ☒ Delete
NAME WHALEN, MONICA
STREET ADDRESS 7076 BRIGHTWATER DRIVE
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

TITLE ☐ Change ☒ Addition
NAME Betty S. Barker
STREET ADDRESS 7072 Brightwater Dr.
CITY-ST-ZIP Keystone Heights FL 32656

TITLE D ☐ Delete
NAME SANDS, LARRY
STREET ADDRESS 5651 CR 352
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

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

TITLE D ☐ Delete
NAME BEYER, THOMAS
STREET ADDRESS 7050 BRIGHTWATER DRIVE
CITY-ST-ZIP KEYSTONE HEIGHTS FL 32656

TITLE ☐ Change ☐ Addition
NAME
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Betty S. Barker Betty S. Barker 1-21-02 904 358-3553

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)