2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 30, 2000 8:00 am
Secretary of State
05-30-2000 90005 041 ****61.25

DOCUMENT # N35142

1. Entity Name

HUNTINGTON TRACE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O PABLO SANTA CRUZ P.O. BOX 1233 SAFETY HARBOR FL 34695 US	C/O PABLO SANTA CRUZ P.O. BOX 1233 SAFETY HARBOR FL 34695-1233 US

DO NOT WRITE IN THIS SPACE

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 59-3004596 ☐ 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
MANKIN, LEONARD J., P.A. 28050 US 19 NORTH STE 100 CLEARWATER FL 34621	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	PD SANTA CRUZ, PABLO 2216 WINDSONG CT SAFETY HARBOR FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VICE PRESIDENT, DIRECTOR JOHN IRVINE 2214 WINDSONG COURT SAFETY HARBOR, FL 34695	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROSS, AL 2222 WINDSONG CT SAFTEY HARBOR FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY, DIRECTOR RON BAURLE 2210 WINDSONG COURT SAFETY HARBOR, FL 34695	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV CHRISTENSEN, MARK 2309 OXFORD CT SAFTEY HARBOR FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER, DIRECTOR BRIAN CABRAL 1709 HUNTINGTON LANE SAFETY HARBOR, FL 34695	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS GREGSON, STEPHEN J 2223 WINDSONG CT SAFTEY HARBOR FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR RICHARD AUSTIN 2305 EATON COURT SAFETY HARBOR, FL 34695	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR MARISA CAIRO 2212 WINDSONG COURT SAFETY HARBOR, FL 34695	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DIRECTOR LARRY JARAE 2218 WINDSONG COURT SAFETY HARBOR, FL 34695	☐ Change ☑ Addition

CR2E037 (9/99)

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 PABLO SANTA CRUZ PRESIDENT 5/11/2000 727-799-7250
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #