NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Aug 29, 2002 8:00 am
Secretary of State
07-17-2002 90127 002 ****70.00

DOCUMENT # N36500

1. Entity Name: Enchanted Grove Mobile Home Owners Assoc.

DO NOT WRITE IN THIS SPACE

98671

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
5137 N. Scenic Hwy		5137 N Scenic Hwy	
Suite, Apt. #, etc. Lot 32		Suite, Apt. #, etc. Lot 32	
City, State: Lake Wales, FL		City, State: Lake Wales, FL	
Zip: 33859	Country: USA	Zip: 33859	Country: USA

4. FEI Number: 59-3040746 — Applied For ☐ Not Applicable ☐

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: Allison Wilson

Street Address (P.O. Box Number Not Acceptable): 5137 N. Scenic Hwy Lot 32

City: Lake Wales FL Zip Code: 33859

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: Allison Wilson, Pres. — 8-20-02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $61.25
Initial or Amended UBR

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	President
NAME	Allison Wilson
STREET ADDRESS	5137 N Scenic Hwy Lot 32
CITY-ST-ZIP	Lake Wales, FL 33859
TITLE	V-Pres
NAME	Richard Caulombe
STREET ADDRESS	5137 N Scenic Hwy Lot 32
CITY-ST-ZIP	Lake Wales, FL 33859
TITLE	Debra Gerhke - Secr - Treas.
NAME	
STREET ADDRESS	5137 N. Scenic Hwy Lot 85
CITY-ST-ZIP	Lake Wales, FL - 33859
TITLE	Gary Lambert - Brd member
NAME	
STREET ADDRESS	5137 N. Scenic Hwy Lot 38
CITY-ST-ZIP	Lake Wales, FL 33859
TITLE	Brd - Member
NAME	Ken Bergren
STREET ADDRESS	5137 N. Scenic Hwy. Lot 25
CITY-ST-ZIP	Le Wales, FL 33859
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

CR2E037B (12/01)

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

SIGNATURE: Allison Wilson — Allison Wilson — 8/20/02 — 863 439-2745

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

7/17/2002-90127-002-$70.00-$70.00

7/17

Attachment A
98671

NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N36500

1. Entity Name
Enchanted Grove Mobile Home Owners Assoc. Inc.

DO NOT WRITE IN THIS SPACE

[redacted]

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
5137 N. Scenic Hwy.
Suite, Apt #, etc

3. Mailing Address
P.O.B 653
Suite, Apt #, etc

City, State
Lake Wales
33859 USA

City & State
Waverly
33877 USA

4. FEI Number
59-3040746
Applied For
Not Applicable

5. Certificate of Status Desired X $8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent
Allison Wilson
P.O.B 653 (Number is Not Acceptable)
Waverly, FL 33877-0653
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 Allison Wilson, Pres. 7-11-02
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when filing) DATE

FEE IS $61.25 Initial or Amended UBR

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP
President Allison Wilson 5137 N Scenic Hwy Lot 33 P.O B 653 Lake Wales, FL 33859 Waverly, FL 33877-0653	
V-Pres. Richard Coulombe 5137 N. Scenic Hwy Lot 32 P.O B 653 Lk Wales, FL 33859 Waverly, FL 33877-0653	
Debora Gerlike 5137 N. Scenic Hwy Lot 15 Lk Wales, FL 33859	DO NOT WRITE IN THIS SPACE
Gary Lambert 5137 N. Scenic Hwy Lot 42 Lk Wales, FL 33859	
Ken Bergman 5137 N. Scenic Hwy Lot 25 Lk Wales, FL 33859	

CR2E037B (12/01)

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SIGNATURE: Allison Wilson Allison Wilson 7/11/02 863-439-2745
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

98611

40720

Attachment

N36500

[redacted]

Enchanted Grove Mobile Home Owners Association

P.O.B. 653
Waverly, Florida 33877
863-439-2745

July 12, 2002

Officers- President Allison Wilson
Vice-Pres. Richard Coulombe
Sec-Treas. Debra Gerhke

Board Of Directors
3 year Term Allison Wilson
Richard Coulombe
Debra Gerhke
2 year term Ken Bergren

1 Year Term Gary Lambert

Activity Committee Chairperson Gena Brough Winter
Nikki Rhoades Summer

Owner-Manager Alan M. Korn
4376 Tidewater Drive
Orlando, FL 32812
407-240-5776