

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 31, 2003 8:00 am**  
**Secretary of State**

03-31-2003 90151 040 \*\*\*\*61.25

0049130

**DOCUMENT # N36839**

1. Entity Name

**FISH HAVEN MOBILE HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business

**500 N. MAITLAND AVE  
SUITE 203  
MAITLAND FL 32751  
US**

Mailing Address

**FISH HAVEN LODGE  
27 LINDA LANE  
AUBURDALE FL 33823  
US**

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 **59-2990534**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**COLLING, LEE JAY  
500 N. MAITLAND AVE  
SUITE 203  
MAITLAND FL 32751**

7. Name and Address of New Registered Agent

Name **George BACH**

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

**355 Havendale Blvd**

**Auburndale Bookkeeping & Tax Service**

City

**Auburndale**

**FL**

Zip Code

**33823**

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. I am familiar with, and accept the obligations of registered agent.

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	<input type="checkbox"/> Delete
NAME	DAVIS, RUSSELL	
STREET ADDRESS	37 LINDA LANE	
CITY-ST-ZIP	AUBURDALE FL 33823	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	MURRAY, THOMAS	
STREET ADDRESS	27 LINDA LANE	
CITY-ST-ZIP	AUBURDALE FL 33823	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	LEVIN, LOIS	
STREET ADDRESS	57 LINDA LANE	
CITY-ST-ZIP	AUBURDALE FL 33823	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	JONES, JACK	
STREET ADDRESS	7 FISH HAVEN ROAD	
CITY-ST-ZIP	AUBURDALE FL	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	DAVIS, ELEANOR	
STREET ADDRESS	37 LINDA LANE	
CITY-ST-ZIP	AUBURDALE FL 33823	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MURRAY, MARLENE	
STREET ADDRESS	27 LINDA LANE	
CITY-ST-ZIP	AUBURDALE FL 33823	

TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Davis, Russell	
STREET ADDRESS	662 Linda Lane	
CITY-ST-ZIP	Auburndale, FL 33823	
TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jack Jones	
STREET ADDRESS	248 Fish Haven Rd.	
CITY-ST-ZIP	Auburndale, FL 33823	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Sybil Kearney	
STREET ADDRESS	664 Linda Lane	
CITY-ST-ZIP	Auburndale, FL 33823	
TITLE	TD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Peggy Montgomery	
STREET ADDRESS	618 Linda Lane	
CITY-ST-ZIP	Auburndale FL 33823	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Lois Levin	
STREET ADDRESS	605 Linda Lane	
CITY-ST-ZIP	Auburndale FL 33823	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Ed Levin	
STREET ADDRESS	605 Linda Lane	
CITY-ST-ZIP	Auburndale FL 33823	

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:

*Russell A Davis*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**RUSSELL A DAVIS**

**MAR 19/03**

**863-984-4030**

CR2E037 (10/02)

Attachment

90065711  
#N36839

Fish Haven Mobile Homeowners Association, Inc. has added  
one (1) Director to the Board for the Year 2003. The  
Name, Address and Title is as follows:

Title	D
Name	Eleanor Davis
Street Address	662 Linda Lane
City-St-Zip	Auburndale, Fl 33823