## **2000 UNIFORM BUSINESS REPORT (UBR)**

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

SIGNATURE

## FILED **DOCUMENT # N38125** Feb 20, 2000 8:00 am 1. Entity Name **Secretary of State** TOBACCO ROAD HOMEOWNERS ASSOCIATION, INC. 02-20-2000 90006 032 \*\*\*\*61.25 Principal Place of Business Mailing Address P.O. BOX 964 P.O. BOX 964 HAVANA FL 32333-0964 HAVANA FL 32333 2. Principal Place of Business 3. Mailing Address DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. 4. FEI Number City & State City & State 59-2136699 Not Applicable Country Zip Country 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Wincle Street Address (P.O. Box Number is Not Acceptable) BASS, WANETA 2016 TOBACCO ROAD HAVANA FL 32333 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** DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Department of State FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. PD TITLE Lenange ☐ Addition TITLE ☐ Delete HULL, JEANNE NAME NAME Tobacco Rd STREET ADDRESS 2005=TOBACCO-ROAD STREET ADDRESS Havanz, Fl. 32333 CITY-ST-ZIP CITY-ST-ZIP HAVANA FL 32333~ ☐ Addition Change ☐ Delete TITLE TITLE WARD, MARY JO NAME NAME STREET ADDRESS 2203 DUTCH MASTER DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HAVANA FL 32333 Z-enange ☐ Addition SD TITLE ... Delete TITLE RALICKI, ELIZABETH J NAME Tampa Nuggel STREET ADDRESS STREET ADDRESS -2400=TAMPA-NUGGET CITY-ST-ZIP CITY-ST-ZIP HZVZNZ, HAVANA FL Zichange Addition TITLE CTD □ Delete TITLE NAME BASS, WANETA NAME STREET ADDRESS STREET ADDRESS 2018 TOBACCO ROAD CITY-ST-ZIP CITY-ST-ZIP HAVANA FL ☐ Delete Change ☐ Addition TITI F CTD TITLE NAME NAME STILLWELL, BETHALINN STREET ADDRESS 2618-TOBACCO-ROAD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP HAVANA FL ☐ Addition TITLE ☐ Change · Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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