

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 26, 2002 8:00 am
Secretary of State

02-26-2002 90135 044 ****70.00

DOCUMENT # N38289

1. Entity Name

TEALBROOKE PROFESSIONAL PARK PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2403 S.E. 17TH STREET
 SUITE 101
 OCALA FL 34471

2403 S.E. 17TH STREET
 SUITE 101
 OCALA FL 34471

2. Principal Place of Business

825 SE 3RD AVE

3. Mailing Address

825 SE 3RD AVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

OCALA FLORIDA

City & State

OCALA, FLORIDA

Zip

34471

Country

U.S.

Zip

34471

Country

U.S.

4. FEI Number

59-2880941

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

EHLERS, HENRY A
 2403 S.E. 17TH STREET
 SUITE 101
 OCALA FL 34471

Name

WINDY A. KEMP

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

825 SE 3RD AVENUE

City

OCALA

FL

Zip Code

34471

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 EHLERS, HENRY A 2403 SE 17TH STREET, SUITE 101 OCALA FL 34471	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THURSTON, GARY 2405 S.E. 17TH STREET, SUITE 301 OCALA FL 34471	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VERO, FRANK 2300 S.E. 17TH STREET OCALA FL 34471	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, P 825 SE 3RD AVENUE	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D, VP 2300 SE 17TH STREET BLDG 402	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TREASURER WINDY A. KEMP 825 SE 3RD AVENUE OCALA, FLORIDA 34471	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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 by 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 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Windy A. Kemp
CFO/Treasurer
(352) 629-7979

1/22/2002

CP2E037 (9/01)