

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N38322

1. Entity Name

ST. JOHN'S WOOD HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P O BOX 461  
DEBARY FL 32713  
US

P O BOX 461  
DEBARY FL 32713-0461  
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

59-3100064

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

HARTMAN, NEAL L  
405 RUTH JENNINGS DR.  
DEBARY, 32713

Name  
RICH VOITEL

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

City  
DEBARY

FL

Zip Code  
32713

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  
VD  
VOITEL, RICH  
19 KEEBLE AVE  
DEBARY FL 32713 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
POPLIN, JAYNE  
16 KEEBLE AVE  
DEBARY FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
LISA BROWN  
390 RUTH JENNINGS DR.  
DEBARY, FL. 32713 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
HARTMAN, NEAL  
405 RUTH JENNINGS DR  
DEBARY FL ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
RAY HOLLIE  
23 KEEBLE AVE.  
DEBARY, FL. 32713 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
POPLIN, JOHN  
16 KEEBLE AVE  
DEBARY FL 32713 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
LARRY MORGAN  
430 RUTH JENNINGS DR.  
DEBARY, FL. 32713 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
MCRAE, CHARLES J  
388 RUTH JENNINGS DR  
DEBARY FL 32713 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
 ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
 ☐ Delete

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; 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: CHARLES J. MCRAE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/00

Date

407-668-1554

Daytime Phone #

CR2E037 (9/99)