

2002 UNIFORM BUSINESS REPORT (UBR)

5/1

FILED
Jun 03, 2002 8:00 am
Secretary of State

05-12-2002 90604 007 ****61.25

DOCUMENT # N39709

1. Entity Name

TREDINGTON PARK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

2970 N. UMBERLAND DR
TALLAHASSEE FL 32308
US

Mailing Address

2970 N. UMBERLAND DR
TALLAHASSEE FL 32308
US

2. Principal Place of Business

2942 N. UMBERLAND Dr.

Suite, Apt. #, etc.

3. Mailing Address

2942 N UMBERLAND Dr.

Suite, Apt. #, etc.

City & State

Tallahassee FL

City & State

Tallahassee FL

Zip

32309

Country

Zip

32309

Country

4. FEI Number

59-3025883

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MASTERSON, KATHLEEN T
2970 N. UMBERLAND DR
TALLAHASSEE FL 32308

7. Name and Address of New Registered Agent

Name: Robert W. Haas

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

2942 N. UMBERLAND Drive

City: Tallahassee

FL Zip Code 32309

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: Robert W Haas Robert W Haas - Treasurer

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/24/02

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

TITLE	PD	☒ Delete
NAME	LONG, BRENDA	
STREET ADDRESS	2948 N. UMBERLAND DRIVE	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	VPD	☒ Delete
NAME	SWANSON, LORI	
STREET ADDRESS	2982 N. UMBERLAND DR	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	VPD	☒ Delete
NAME	WALKER, GEORGE	
STREET ADDRESS	2950 N. UMBERLAND DRIVE	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	SD	☐ Delete
NAME	SEARS, DEBRA (D)	
STREET ADDRESS	2959 CAMPTON WAY	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE	TD	☒ Delete
NAME	MASTERSON, KATHLEEN T	
STREET ADDRESS	2970 N. UMBERLAND DRIVE	
CITY-ST-ZIP	TALLAHASSEE FL 32308	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President (D)	☐ Change ☒ Addition
NAME	Gia Kolias	
STREET ADDRESS	2944 N UMBERLAND Dr	
CITY-ST-ZIP	Tallahassee FL 32309	
TITLE	Vice President (D)	☐ Change ☒ Addition
NAME	Cindy Barr	
STREET ADDRESS	2978 N UMBERLAND Dr.	
CITY-ST-ZIP	Tallahassee FL 32309	
TITLE	Treasurer (D)	☐ Change ☒ Addition
NAME	Robert W Haas	
STREET ADDRESS	2942 N UMBERLAND Dr.	
CITY-ST-ZIP	Tallahassee FL 32309	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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: Robert W Haas

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/24/02 (850) 668 0191

CR2E037 (9/01)