

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2001 8:00 am
Secretary of State

02-28-2001 90125 029 ****61.25

DOCUMENT # N39970

1. Entity Name

LITTLE CREEK HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business 2180 WEST SR 434 STE. 5000 LONGWOOD FL 32779	Mailing Address 2180 WEST SR 434 STE. 5000 LONGWOOD FL 32779
---	---

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip
--	--



DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3029049	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HART, JAMES W JR. SENTRY MANAGEMENT INC. 2180 WEST SR 434, STE. 5000 LONGWOOD FL 32779-5044	7. Name and Address of New Registered Agent PALMER, BETH A 1840 CYPRESS SPRINGS DRIVE ORLANDO FL 32825
---	---

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: <i>Beth Palmer Property First, Inc.</i> 3-21-01 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when re-registering) 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 SNOWBERGER, OLGA P 1842 RIVER BIRCH AVE OVIEDO FL 32765 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P D Napolitano, Lisa R 2892 Running Springs Lp Oviedo, FL 32765 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WEGMAN, LARRY 1829 RIVER BIRCH AVE OVIEDO FL 32765 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP D Murphy, Michael 2875 Old Kerry Ct Oviedo, FL 32765 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SINGER, HENDRY 2750 CORDGRASS ST OVIEDO FL 32765 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T-D MacKenzie, David B 2732 Running Springs Lp Oviedo, FL 32765 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BOGGS, EWELL 2774 RUNNING SPRINGS LOOP OVIEDO FL 32765 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Tomasetti, Thomas J. 2740 Cordgrass St Oviedo, FL 32765 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GENDREAU, LISA 1761 PRAIRIE VIEW LN OVIEDO FL 32765 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DD Bacile, John I. 2732 Willow Creek Dr Oviedo, FL 32765 ☒ 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: *Lisa R Napolitano*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Typed Name)

CR2E037 (10-00)