

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 12, 2000 8:00 am
Secretary of State

04-12-2000 90039 026 ****61.25

B0058725

DOCUMENT # N41527
1. Entity Name
CHESAPEAKE POINT MOBILE COURT
HOMEOWNERS ASSOCIATION INC.

Principal Place of Business **Mailing Address**
CHESAPEAKE POINT MOBILE COURT SAME
800 CHESAPEAKE DR.
#26
TARPON SPRINGS FL 34689

2. Principal Place of Business **3. Mailing Address**

Suite, Apt. #, etc.

City & State

Zip **Country** **Zip** **Country**

4. FEI Number **Applied For**
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

ST JACQUES, MAURICE P.
800 CHESAPEAKE DR.
#26
TARPON SPRINGS FL 34689

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** **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 MAURICE P. ST JACQUES, PRESIDENT Maurice P. St Jacques April 3, 2000
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 ☐ **\$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 DP ☐ Delete
NAME ST JACQUES, MAURICE P
STREET ADDRESS 800 CHESAPEAKE DR #26
CITY-ST-ZIP TARPON SPRINGS FL 34689

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

TITLE 1VPD ☐ Delete
NAME BUBB FRANK
STREET ADDRESS 800 CHESAPEAKE DR #48
CITY-ST-ZIP TARPON SPRINGS FL 34689

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

TITLE 2VPD ☒ Delete
NAME SHAW, DOROTHY
STREET ADDRESS 800 CHESAPEAKE DR #24
CITY-ST-ZIP TARPON SPRINGS FL 34689

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

TITLE T ☐ Delete
NAME CARLSON RANDY
STREET ADDRESS 800 CHESAPEAKE DR #20
CITY-ST-ZIP TARPON SPRINGS FL 34689

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

TITLE S ☐ Delete
NAME KIETZMAN, MARTHA
STREET ADDRESS 800 CHESAPEAKE DR #29
CITY-ST-ZIP TARPON SPRINGS FL 34689

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

TITLE ☐ Delete
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: Maurice P. St Jacques
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 3, 2000
Date Daytime Phone #

CR2E037 (9/99)