

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 10, 2001 08:00 AM****Secretary of State****DOCUMENT # N41833**

1. Entity Name

16TH FAIRWAY VILLAS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
8624 FIRESTONE CIRCLE	8624 FIRESTONE CIRCLE
CLERMONT FL 34711 US	CLERMONT FL 34711 US

2. Principal Place of Business	3. Mailing Address
8540 FIRESTONE CIRCLE	8540 FIRESTONE CIRCLE

Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
CLERMONT FL	CLERMONT FL

Zip	Country	Zip	Country
34711	US	34711	US

4. FEI Number	Applied For
59-3061756	Not Applicable

5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
HOVIS, GEORGE E. 11201 HARDER RD. CLERMONT FL 34711 US	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	01/10/2001
Signature, typed or printed name of registered agent and title if applicable.	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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST HARMON BARBARA 8624 FIRESTONE CIRCLE CLERMONT FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP TAYLOR FRED D 8540 FIRESTONE CIRCLE CLERMONT FL 34711 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOVIS, GEORGE E. 481 E. HIGHWAY 50 CLERMONT FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST TAYLOR BETTY S 8540 FIRESTONE CIRCLE CLERMONT FL 34711 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YEMINGTON JANE R 8640 FIRESTONE CIRCLE CLERMONT FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D YEMINGTON JANE R 8640 FIRESTONE CIRCLE CLERMONT FL 34711 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BROWN NORVAL 8616 FIRESTONE CIRCLE CLERMONT FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN NORVAL 8616 FIRESTONE CIRCLE CLERMONT FL 34711 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORR JAMES V. 8600 FIRESTONE CIRCLE CLERMONT FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ORR JAMES V. 8600 FIRESTONE CIRCLE CLERMONT FL 34711 ☒ 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)(f), 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: FRED TAYLOR	DP	01/10/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		

CR2E037 (11/00)