

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N41864

1. Entity Name

MOBILAND BY THE SEA HOMEOWNERS ASSOCIATION, INC.

FILED
Apr 30, 2001 8:00 am
Secretary of State

04-30-2001 90344 018 ****61.25

Principal Place of Business

2072 MOBILAND DR
MELBOURNE FL 32935-4842
US

Mailing Address

2072 MOBILAND DR
MELBOURNE FL 32935-4842
US

00046336



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2101 MOBILAND DR.
Suite, Apt. #, etc.
MELBOURNE, FLORIDA
City & State

3. Mailing Address

2101 MOBILAND DRIVE
Suite, Apt. #, etc.
MELBOURNE, FLORIDA
City & State

4. FEI Number

59-3106726

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOUTHILLIER, RICHARD A.
2072 MOBILAND DR
MELBOURNE FL 32935

7. Name and Address of New Registered Agent

Name

RAWLINS, MILDRED

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

2101 MOBILAND DRIVE
City MELBOURNE FL Zip Code 32935

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

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

MILDRED RAWLINS

4-20-01

(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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	DANNER, HELEN	
STREET ADDRESS	4459 VTICA CIRCLE	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	DANNER, KENNETH W	
STREET ADDRESS	4459 VTICA CIRCLE	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	BOUTHILLIER, RICHARD A	
STREET ADDRESS	2072 MOBILAND DR	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	TD	<input type="checkbox"/> Delete
NAME	SEDOR, STEVEN	
STREET ADDRESS	4455 UTICA CIRCLE	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	D	<input type="checkbox"/> Delete
NAME	CARD, ROGER	
STREET ADDRESS	2119 MOBILAND DRIVE	
CITY-ST-ZIP	MELBOURNE FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	R.D.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HOYT, RICHARD E.	
STREET ADDRESS	2089 MOBILAND DRIVE	
CITY-ST-ZIP	MELBOURNE, FL 32935	
TITLE	V.D.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BATCHELOR, ELIZABETH	
STREET ADDRESS	2104 MOBILAND DRIVE	
CITY-ST-ZIP	MELBOURNE, FL 32935	
TITLE	S.D.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RAWLINS, MILDRED	
STREET ADDRESS	2101 MOBILAND DRIVE	
CITY-ST-ZIP	MELBOURNE, FL 32935	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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:

Steven Sedor

STEVEN SEDOR 4-20-01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

0029974