

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 30, 2002 8:00 am
Secretary of State

04-30-2002 90076 034 ****70.00

DOCUMENT # N42068

1. Entity Name

BUCKHORN ESTATES HOMEOWNER'S ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P.O. BOX 1586
VALRICO FL 33596
US

P.O. BOX 1586
VALRICO FL 33596
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3053617

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BUSH, REX
2610 FREELAND DR.
VALRICO FL 33594

Name JAMES, JUDY

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

325 South Boulevard

Tampa FL 33606

City

FL

Zip Code

33606

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

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
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 PD
NAME FALIERO, KENNY
STREET ADDRESS 2635 GREEN VALLEY ST
CITY-ST-ZIP VALRICO FL 33594 ☒ Delete

TITLE PD
NAME DORSEY, KEVIN
STREET ADDRESS 2721 BRIANHOLLY DRIVE
CITY-ST-ZIP VALRICO, FL 33594 ☒ Change ☐ Addition

TITLE VD
NAME DORSEY, KEVIN
STREET ADDRESS 2721 BRIAN HOLLY DR
CITY-ST-ZIP VALRICO FL 33594 ☐ Delete

TITLE VD
NAME MORELAND, RICHARD
STREET ADDRESS 2719 BRIANHOLLY DRIVE
CITY-ST-ZIP VALRICO, FL 33594 ☐ Change ☒ Addition

TITLE TD
NAME BUSH, REX
STREET ADDRESS 2610 FREELAND DR
CITY-ST-ZIP VALRICO FL 33594 ☒ Delete

TITLE TD
NAME PERNA, CINDY
STREET ADDRESS 2501 Cedarcrest Place
CITY-ST-ZIP Valrico, FL 33594 ☐ Change ☒ Addition

TITLE SD
NAME FALIERO, JENNIFER
STREET ADDRESS 2635 GREEN VALLEY ST
CITY-ST-ZIP VALRICO FL 33-5944 ☒ Delete

TITLE SD
NAME BALDWIN, JOHN
STREET ADDRESS 2409 BUCKNELL DRIVE
CITY-ST-ZIP VALRICO, FL 33594 ☒ Change ☐ Addition

TITLE D
NAME BALDWIN, JOHN
STREET ADDRESS 2409 BUCKNELL DR
CITY-ST-ZIP VALRICO FL 33594 ☐ Delete

TITLE D
NAME PARBER, MIKE
STREET ADDRESS 2604 FREELAND DRIVE
CITY-ST-ZIP VALRICO, FL 33594 ☐ Change ☒ Addition

TITLE D
NAME BALDWIN, GAIL
STREET ADDRESS 2409 BUCKNELL DR
CITY-ST-ZIP VALRICO FL 33594 ☐ Delete

TITLE D
NAME Beneely Bush
STREET ADDRESS 2610 Freeland Drive
CITY-ST-ZIP Valrico, FL 33594 ☐ 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 on the back of the check if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)