

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 23, 2003 8:00 am**  
**Secretary of State**

04-23-2003 90091 019 \*\*\*\*61.25

**DOCUMENT # N42068**

1. Entity Name  
**BUCKHORN ESTATES HOMEOWNER'S ASSOCIATION, INC.**



Principal Place of Business

P.O. BOX 1586  
VALRICO FL 33595  
US

Mailing Address

P.O. BOX 1586  
VALRICO FL 33595  
US

**11008582**



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

**JAMES, JUDY**  
**325 SOUTH BOULEVARD**  
**TAMPA FL 33606**

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. I am familiar with, and accept the obligations of registered agent.

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  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	MORELAND, RICHARD	
STREET ADDRESS	2719 BRIANHOLLY DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	PD	<input type="checkbox"/> Delete
NAME	DORSEY, KEVIN	
STREET ADDRESS	2721 BRIAN HOLLY DR	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	TD	<input type="checkbox"/> Delete
NAME	PERNA, CINDY	
STREET ADDRESS	2501 CEDARCREST PLACE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	YARBER, MIKE	
STREET ADDRESS	2604 FREELAND DRIVE	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	SD	<input type="checkbox"/> Delete
NAME	BALDWIN, JOHN	
STREET ADDRESS	2409 BUCKNELL DR	
CITY-ST-ZIP	VALRICO FL 33594	
TITLE	D	<input type="checkbox"/> Delete
NAME	BALDWIN, GAYLE	
STREET ADDRESS	2409 BUCKNELL DR	
CITY-ST-ZIP	VALRICO FL 33594	

TITLE	Vice President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Linda Wells	
STREET ADDRESS	Bucknell Drive	
CITY-ST-ZIP	Valrico, FL 33594	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Rob Brinkman	
STREET ADDRESS	2501 Bucknell Drive	
CITY-ST-ZIP	Valrico, FL 33594	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Maria Singfield	
STREET ADDRESS	2608 Freeland Drive	
CITY-ST-ZIP	Valrico, FL 33594	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Val Voll	
STREET ADDRESS	2820 Falling Leaves Prime	
CITY-ST-ZIP	Valrico, FL 33594	
TITLE	Director	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Beverly Brush	
STREET ADDRESS	2610 Freeland Drive	
CITY-ST-ZIP	Valrico, FL 33594	

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:

*Signature of Kevin Dorson* (Kevin Dorson) 4/14/03 813-684-8676  
813-431-1508

CR2E037 (10/02)