

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90349 032 *****61.25

0024145

DOCUMENT # N42226

1. Entity Name

THE SARATOGA HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

32140 DEWBERRY LN
SORRENTO FL 32776

Mailing Address

32140 DEWBERRY LN
SORRENTO FL 32776

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CHUBBOY, ROBERT
32100 DEWBERRY LN.
SORRENTO FL 32776

7. Name and Address of New Registered Agent

Name THOMAS BROWN

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

32140 DEWBERRY LANE

City

SORRENTO

FL

Zip Code

32776

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

THOMAS BROWN - PRESIDENT

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

(NOTE: Registered Agent signature required when re-registering)

DATE

4/21/01

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	☒ Delete
NAME	CHUBBOY, ROBERT	
STREET ADDRESS	32100 DEWBERRY LN.	
CITY-ST-ZIP	SORRENTO FL	
TITLE	TD	☒ Delete
NAME	CHUBBOY, JOANNE W.	
STREET ADDRESS	32100 DEWBERRY LN.	
CITY-ST-ZIP	SORRENTO FL	
TITLE	SD	☒ Delete
NAME	DAVIS, MAUREEN	
STREET ADDRESS	32031 DEWBERRY LANE	
CITY-ST-ZIP	SORRENTO FL	
TITLE	VD	☒ Delete
NAME	DAVIS, SPENCER	
STREET ADDRESS	32031 DEWBERRY LANE	
CITY-ST-ZIP	SORRENTO FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☒ Addition
NAME	THOMAS BROWN	
STREET ADDRESS	32140 DEWBERRY LANE	
CITY-ST-ZIP	SORRENTO, FL 32776	
TITLE	SD	☐ Change ☒ Addition
NAME	JANICE DALEY	
STREET ADDRESS	32111 DEWBERRY LANE	
CITY-ST-ZIP	SORRENTO, FL 32776	
TITLE	VD	☐ Change ☒ Addition
NAME	ROBERT ROBERTS RAHMANN	
STREET ADDRESS	32030 DEWBERRY LANE	
CITY-ST-ZIP	SORRENTO, FL 32776	
TITLE		☐ Change ☐ Addition
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/21/01 (407)660-1288

CR2E037 (10/00)