

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N46565

1. Entity Name

PONDEROSA ESTATES HOME OWNER'S ASSOCIATION, INC.

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90075 023 ****61.25

Principal Place of Business

Mailing Address

18621 S.E. 18TH ST
SILVER SPRINGS FL 34488
US

18621 S.E. 18TH ST.
SILVER SPRINGS FL 34488-6483
US

2. Principal Place of Business

1955 SE. 185 Court

Suite, Apt. #, etc.

3. Mailing Address

1855 SE. 185 Court

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Silver Springs FL

Zip
34488

Country

Marion

City & State

Silver Springs FL

Zip
34488

Country

Marion

4. FEI Number

59-3180061

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GEARHART, THEODOR
18621 S.E. 18TH STREET
SILVER SPRINGS FL 34488

7. Name and Address of New Registered Agent

Name

Betty J. Kilmer

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

1855 SE. 185 Court

City

Silver Springs

FL

Zip Code

34488

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

Betty J. Kilmer Betty J. Kilmer Pres. 3-6-00

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

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	GEARHART, THEODOR	
STREET ADDRESS	18621 S.E. 18TH STREET	
CITY-ST-ZIP	SILVER SPRINGS FL 34488	
TITLE	VD	<input type="checkbox"/> Delete
NAME	KILMER, BETTY	
STREET ADDRESS	1855 S.E. 185TH COURT	
CITY-ST-ZIP	SILVER SPRINGS FL 34488	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GWINN, NATHANIEL	
STREET ADDRESS	18548 SE 19TH STREET	
CITY-ST-ZIP	SILVER SPRING FL	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	FORTH, FRANCIS W.	
STREET ADDRESS	18389 S.E. 18TH STREET	
CITY-ST-ZIP	SILVER SPRINGS FL 34488	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	THOMSON, DOROTHEA	
STREET ADDRESS	1930 SE 183RD TERRACE	
CITY-ST-ZIP	SILVER SPRINGS FL 34488	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	BRUNELL, RAYMOND	
STREET ADDRESS	18385 S.E. 18TH STREET	
CITY-ST-ZIP	SILVER SPRINGS FL 34488	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	AD Betty J. Kilmer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	1855 SE. 185 Court	
STREET ADDRESS	Silver Springs Fl. 34488	
CITY-ST-ZIP		
TITLE	VP theodor Gearhart	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	18621 SE 18th St.	
STREET ADDRESS	Silver Springs, Fl. 34488	
CITY-ST-ZIP		
TITLE	ST Dolores Gearhart	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	18621 S.E. 18th St	
STREET ADDRESS	Silver Springs Fl. 34488	
CITY-ST-ZIP		
TITLE	D Shirley Mahers	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	18571 SE 18th St.	
STREET ADDRESS	Silver Springs Fl. 34488	
CITY-ST-ZIP		
TITLE	D Raymond Burnell	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	18385 SE 18th St.	
STREET ADDRESS	Silver Springs Fl. 34488	
CITY-ST-ZIP		
TITLE	Nathaniel Gwinn	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	18548 SE. 19 St.	
STREET ADDRESS	Silver Springs Fl. 34488	
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:

Betty J. Kilmer Betty J. Kilmer 36-00 352-625-3427

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)