

# 2001 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 14, 2001 8:00 am**  
**Secretary of State**

0018017

**DOCUMENT # N47560**

1. Entity Name

**ROSEDOWN HOMEOWNERS ASSOCIATION OF PENSACOLA, IN**

03-14-2001 90208 014 \*\*\*\*61.25

Principal Place of Business

**PATRICK KOZMA  
 2252 ROSEDOWN DR  
 CANTONMENT FL 32533  
 US**

Mailing Address

**PATRICK KOZMA  
 2552 ROSEDOWN DR  
 CANTONMENT FL 32533  
 US**

2. Principal Place of Business

**Mark Meyer**

3. Mailing Address

**Mark Meyer**

Suite, Apt. #, etc.

**2541 Rosedown Drive**

Suite, Apt. #, etc.

**2541 Rosedown Drive**

City & State

**Cantonment FL**

City & State

**Cantonment FL**

Zip

**32533**

Country

**US**

Zip

**32533**

Country

**US**

4. FEI Number

**59-3309259**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**KOZMA, PATRICK  
 2552 ROSEDOWN DR  
 CANTONMENT FL 32533**

7. Name and Address of New Registered Agent

Name **Mark Meyer**

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

**2541 Rosedown Drive**

City

**Cantonment FL FL**

Zip Code

**32533**

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

*Mark Meyer*

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

(NOTE: Registered Agent signature required when reinstating)

**3-12-01**

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**  Delete  
 NAME **KOZMA, PATRICK J**  
 STREET ADDRESS **2552 ROSEDOWN DR**  
 CITY-ST-ZIP **CANTONMENT FL 32533**

TITLE **TD**  Delete  
 NAME **KOZMA, PORTIA D**  
 STREET ADDRESS **2551 ROSEDOWN DR.**  
 CITY-ST-ZIP **CANTONMENT FL 32533**

TITLE **VPD**  Delete  
 NAME **YOUNG, KATHLEEN**  
 STREET ADDRESS **2626 DEVLIN WAY**  
 CITY-ST-ZIP **CANTONMENT FL 32533**

TITLE **ST**  Delete  
 NAME **KOZMAR, PORTIA**  
 STREET ADDRESS **2552 ROSEDOWN DR**  
 CITY-ST-ZIP **CANTONMENT FL 32533**

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 **Mark Meyer**  
 STREET ADDRESS **2541 Rosedown Drive**  
 CITY-ST-ZIP **Cantonment, FL 32533**

TITLE **TD**  Change  Addition  
 NAME **Mary Meyer**  
 STREET ADDRESS **2541 Rosedown Drive**  
 CITY-ST-ZIP **Cantonment FL 32533**

TITLE **ST**  Change  Addition  
 NAME **Mark Meyer**  
 STREET ADDRESS **2541 Rosedown Drive**  
 CITY-ST-ZIP **Cantonment FL 32533**

TITLE **PD**  Change  Addition  
 NAME **Derek Johnson**  
 STREET ADDRESS **2544 Rosedown Drive**  
 CITY-ST-ZIP **Cantonment FL 32533**

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:

*Mark Meyer*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3-12-01**

Date

**850-937-9584**

Daytime Phone #

CFR2E037 (10/00)



DO NOT WRITE IN THIS SPACE