2002 UNIFORM BUSINESS REPORT (UBR)

0069230

DOCUMENT # N49239

1. Entity Name

COUNTRY VILLAS OF SAFETY HARBOR HOMEOWNERS ASSOCIATION, INC.

FILED
02 APR 23 AM 11:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business	Mailing Address
PO BOX 560 SAFETY HARBOR FL 34695-0560 US	PO BOX 560 SAFETY HARBOR FL 34695-0560 US

DO NOT WRITE IN THIS SPACE

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 59-3005259 ☐ Applied For ☐ Not Applicable

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
GIFFORD-MYERS, JANET 248 HARBORSIDE DR SAFETY HARBOR FL 34695	Name: Corporation Service Company Street Address (P.O. Box Number is Not Acceptable): 1201 Hays Street City: Tallahassee **FL** Zip Code: 32301

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 _____ **Brian Courtney Asst. V. Pres.** DATE 4-22-02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HICKS, ROBERT 105 MEADOWCROSS DR SAFETY HARBOR FL 34695	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD President DAVID Heim 108 JASMIN circle SAFETY HARBOR FL 34695	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP FEO, BARBARA 110 HILLCREST SAFETY HARBOR FL 34695	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP DALE JOHANNES 101 JASMINE CIRCLE SAFETY HARBOR FL 34695	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HICKS, TRISH 105 MEADOWCROSS DR SAFTY HARBOR FL 34695	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MARY LAZZELL 105 JASMINE CIRCLE SAFETY HARBOR FL 34695	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HAWKS, TRISH 107 MEADOWCROSS DR SAFTY HARBOR FL 34695	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRUCE MCINTYRE 111 TIMBER CIRCLE SAFETY HARBOR, FL. 34695	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	200005452142--0 -05/06/02--01021--025 *****61.25 *****61.25	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T8	☐ Change ☐ Addition

CR2E037 (9/01)

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: _____ DAVID M. HEIM 4/14/02 (727) 791-0419

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #