

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000000624

1. Entity Name

BRIGHT WATER PLACE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3317 INDIAN TRAIL
EUSTIS FL 32726

P.O. BOX 350073
GRAND ISLAND FL 32735-0073

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

59-3195077

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

SEMENTO, LAWRENCE J ESQ.
531 NORTH BAY STREET
EUSTIS FL 32726

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.

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
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME PICCERELLI, LOUIS
STREET ADDRESS 3317 INDIAN TRAIL
CITY-ST-ZIP EUSTIS FL 32726 ☒ Delete

TITLE PD
NAME Cliff Cochran
STREET ADDRESS 3233 Indian Trail, Eustis, 32726
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE D
NAME CONIFE, JAMES G
STREET ADDRESS 3520 INDIAN TRAIL
CITY-ST-ZIP EUSTIS FL 32726 ☒ Delete

TITLE VP D
NAME George Spring
STREET ADDRESS 3301 Indian Trail, Eustis, 32726
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE SD
NAME WHITAKER, KATHRYN
STREET ADDRESS 3317 INDIAN TRAIL
CITY-ST-ZIP EUSTIS FL 32726 ☐ Delete

TITLE TD
NAME Lydia Bianchi
STREET ADDRESS 3325 Indian Trail, Eustis, 32726
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE TD
NAME AMOS, RONALD
STREET ADDRESS 3317 INDIAN TRAIL
CITY-ST-ZIP EUSTIS FL 32726 ☒ Delete

TITLE D
NAME Karen Corr
STREET ADDRESS 3547 Hunters Trail Cir, Eustis, 32726
CITY-ST-ZIP ☐ Change ☒ Addition

TITLE D
NAME WHITAKER, KATHRYN
STREET ADDRESS 3317 INDIAN TRAIL
CITY-ST-ZIP EUSTIS FL 32726 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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

Lydia Bianchi

Date

Daytime Phone #

4-28-00 483-0099

CR2E037 (9/99)