

**2000 UNIFORM BUSINESS REPORT (UBR)**

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**FILED**  
**Aug 17, 2000 8:00 am**  
**Secretary of State**

02-22-2000 90038 034 \*\*\*\*61.25

**DOCUMENT # N93000000945**

1. Entity Name

**CHAMPIONS GREEN III HOMEOWNERS ASSOCIATION, INC.** *R*

Principal Place of Business

Mailing Address

CHAMPIONS GREEN DRIVE  
 GULF BREEZE FL 32562  
 US

P.O BOX 6302  
 GULF BREEZE FL 32562  
 US

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

**59-3327409**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VAN MATRE, THOMAS G JR.**  
 4300 BAYOU BLVD  
 SUITE 16  
 PENSACOLA FL 32503

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**  
**After September 13, 2000 min. will be \$236.25**

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  Delete  
**SD CORNETT, FRED**  
 STREET ADDRESS **1472 CHAMPOINS GREEN DR.**  
 CITY-ST-ZIP **GULF BREEZE FL 32561**

TITLE NAME  Change  Addition  
*(Pres)*  
~~Corbett Fred~~  
~~1472 Champions Green Dr~~  
~~Gulf Breeze FL 32561~~

TITLE NAME  Delete  
**D BAKER, BILL**  
 STREET ADDRESS **1403 CHAMPIONS GREEN DR.**  
 CITY-ST-ZIP **GULF BREEZE FL 32561**

TITLE NAME  Change  Addition  
**D (TREASURER)**  
**George Habov**  
 STREET ADDRESS **1412 Champions Green Dr**  
 CITY-ST-ZIP **GULF BREEZE FL 32561**

TITLE NAME  Delete  
**GATWOOD, MILLARD**  
 STREET ADDRESS **1424 CHAMPIONS GREEN DR.**  
 CITY-ST-ZIP **GULF BREEZE FL 32561**

TITLE NAME  Change  Addition  
~~Keat...~~  
~~1403 Champions Green Dr~~  
~~Gulf Breeze FL 32561~~

TITLE NAME  Delete  
**D Jim Boulet**  
 STREET ADDRESS **4481 Madura Rd.**  
 CITY-ST-ZIP **Gulf Breeze, Fl, 32561**

TITLE NAME  Change  Addition  
**D O.R. Smith**  
 STREET ADDRESS **1420 Champions Green Dr.**  
 CITY-ST-ZIP **Gulf Breeze, Fl. 32561**

TITLE NAME  Delete  
**D Marilyn Moulton**  
 STREET ADDRESS **1427 Champions Green Dr.**  
 CITY-ST-ZIP **Gulf Breeze, FL. 32561**

TITLE NAME  Change  Addition

TITLE NAME  Delete

TITLE NAME  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

*George Habov*

**7-10-00**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #