

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000002500

1. Entity Name

HISTORIC WINTER HAVEN, INC.

Principal Place of Business

1433 N LAKE HOWARD DR  
WINTER HAVEN FL 33881

Mailing Address

1433 N LAKE HOWARD DR  
WINTER HAVEN FL 33881

2. Principal Place of Business

660 POPE AVE, NW

Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1333

Suite, Apt. #, etc.

City & State

WINTER HAVEN, FL

City & State

WINTER HAVEN, FL

Zip

33881

Country

U.S.

Zip

33883-1333

Country

U.S.

4. FEI Number

59-3294479

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

GERNERT, BOB JR  
1433 N LAKE HOWARD DR  
WINTER HAVEN FL 33881

7. Name and Address of New Registered Agent

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

TITLE D ☐ Delete  
NAME HOWELL, JUDY  
STREET ADDRESS 11 HICKORY WAY  
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE D ☐ Delete  
NAME CLEAVES, JUDY B  
STREET ADDRESS 503 LAKE MARIAM TERR  
CITY-ST-ZIP WINTER HAVEN FL

TITLE T ☐ Delete  
NAME CAMPBELL, ROBERT  
STREET ADDRESS 4407 BURLINGTON DR.  
CITY-ST-ZIP WINTER HAVEN FL

TITLE PD ☐ Delete  
NAME GERNERT, BOB JR  
STREET ADDRESS 1433 N LAKE HOWARD DR  
CITY-ST-ZIP WINTER HAVEN FL 33881

TITLE D ☐ Delete  
NAME RALEY, WILLIAM L  
STREET ADDRESS 507 AVE. B, N.W.  
CITY-ST-ZIP WINTER HAVEN FL

TITLE SD ☒ Delete  
NAME GERNERT, MELEA  
STREET ADDRESS 1433 N LAKE HOWARD DR  
CITY-ST-ZIP WINTER HAVEN FL 33881

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DIRECTOR ☐ Change ☒ Addition  
NAME GLENDA JONES  
STREET ADDRESS 608 AVE 3, NE  
CITY-ST-ZIP WINTER HAVEN, FL 33881

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

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

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

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:

*Bob Gernert*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-30-01

Date

863-293-2138

Daytime Phone #

CR2E037 (10/00)

00004568



DO NOT WRITE IN THIS SPACE