2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2001 8:00 am
Secretary of State
03-09-2001 90010 011 ****61.25

DOCUMENT # N93000004718

1. Entity Name

SUNCREST UNIT 6 HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1633 E VINCE STREET. SUITE 110 KISSIMMEE FL 34744 US	1633 E VINCE STREET. SUITE 110 KISSIMMEE FL 34744 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 59-3247591 ☐ 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
LELAND MANAGEMENT INC. 1633 E. VINE ST., STE 110 KISSIMMEE FL 34744	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	T LOW, IAN 10723 CHERRY OAK CIRCLE ORLANDO FL 32817	☐ Delete	TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	ROGER DONLE 10526 Cherry Oak Cr ORLANDO, FL 32817	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD MILLER, MIKE 10742 CHERRY OAK DR. ORLANDO FL 32817	☐ Delete	TITLE P NAME STREET ADDRESS CITY-ST-ZIP	CHRISTIAN GUEX 10831 Cherry Oak Cr. ORLANDO, FL-32817	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD YOLK, ARTHUR 10801 CHERRY OAK CIR ORLANDO FL 32817	☑ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	~~Delete~~ EDGAR GIL 4104 OAKBERRY DR. ORLANDO, FL 32817	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DONIE ~~DONNELY, PAM~~ ROGER 10526 CHERRY OAK CIR. ORLANDO FL 32817	☑ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	MILAGROS PABON 10606 Cherry Oak Cr. ORLANDO, FL 32817	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DST JOSEPH PETRO 10719 CHERRY OAK CIRCLE ORLANDO FL 32817	☑ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	ANA GARCIA 10843 Cherry Oak Cr ORLANDO, FL 32817	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BERT HANWELL 10836 Cherry Oak Cr. ORLANDO, FL 32817	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	ANGEL ARZOLA 10504 Cherry Oak Cr ORLANDO, FL 32817	☐ Change ☐ Addition

CR2E037 (10/00)

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 REQUIRED CHRISTIAN GUEX 3/7/01 (407) 679-4221
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #