

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000004978

1. Entity Name

WESTSIDE COMMUNITY ASSOCIATION, INC.

Principal Place of Business

1321 SHEPPARD AVENUE
SANFORD FL 32771
US

Mailing Address

1321 SHEPPARD AVENUE
SANFORD FL 32771
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

59-3212525

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

YOUNG, JOE
1321 SHEPPARD AVENUE
SANFORD FL 32771

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 YOUNG, JOE
STREET ADDRESS 1321 SHEPPARD AVENUE
CITY-ST-ZIP SANFORD FL 32771

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE VPD
NAME HOPKINS-KNIGHT, MARGIE
STREET ADDRESS 1010 W. 16TH STREET
CITY-ST-ZIP SANFORD FL 32771

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition

TITLE S
NAME WYNN, BETTY J
STREET ADDRESS 120 CASTLE BREWERY CT
CITY-ST-ZIP SANFORD FL 32771

☒ Delete

TITLE S
NAME Hopkins Jancie
STREET ADDRESS 1010 W. 16th St
CITY-ST-ZIP Sanford, FL 32771

☒ Change ☐ Addition

TITLE S
NAME PINKEY, BEVERLY A
STREET ADDRESS 1506 W. 18TH STREET
CITY-ST-ZIP SANFORD FL 32771

☒ Delete

TITLE S
NAME Barnes Johnnie
STREET ADDRESS 1207 W. 14th St
CITY-ST-ZIP Sanford, FL 32771

☒ Change ☐ Addition

TITLE C
NAME LAWRENCE, GWENDOLYN
STREET ADDRESS 1315 SOUTHWEST ROAD
CITY-ST-ZIP SANFORD FL 32771

☒ Delete

TITLE C
NAME Burke Geraldine
STREET ADDRESS 1301 W. 11th St
CITY-ST-ZIP Sanford, FL 32771

☒ Change ☐ Addition

TITLE TD
NAME EUDELL, JANNIE
STREET ADDRESS 907 S. HOLLY AVENUE
CITY-ST-ZIP SANFORD FL 32771

☐ Delete

TITLE
NAME Jannie Eudell
STREET ADDRESS 907 So. Holly Ave
CITY-ST-ZIP Sanford, FL 32771

☐ 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)(b) 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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-00

Date

Daytime Phone #

CR2E037 (9/99)