

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N93000005633

1. Entity Name

ELLISON PARK 1 HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**May 01, 2000 8:00 am**  
**Secretary of State**

05-01-2000 90035 046 \*\*\*\*61.25

Principal Place of Business

685 DYSON ROAD  
HAINES CITY FL 33844  
US

Mailing Address

685 DYSON ROAD  
HAINES CITY FL 33844-8587

2. Principal Place of Business

586 ELLISON PKWY

3. Mailing Address

586 ELLISON PKWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

HAINES CITY FL 71A

City & State

HAINES CITY FL 71A

Zip

Country

33844 FL

Zip

Country

33844 FL

4. FEI Number

59-3305438

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

KEEN, JAMES R  
685 DYSON ROAD  
HAINES CITY FL 33844

7. Name and Address of New Registered Agent

Name

APRIL MURRAY

(TRES)

Street Address (P.O. Box Number is Not Acceptable)

586 ELLISON PKWY

City

HAINES CITY

FL

Zip Code

33844

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

APRIL MURRAY (Treasurer of Assoc.) 4-20-2000

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	PD	<input checked="" type="checkbox"/> Delete
NAME	LANGSTON, GOERGE	
STREET ADDRESS	671 ELLISON PKY	
CITY-ST-ZIP	HAINES CITY FL	
TITLE	S	<input type="checkbox"/> Delete
NAME	WILLIAMS, RUTH	
STREET ADDRESS	632 ELLISON PKWY	
CITY-ST-ZIP	HAINES CITY FL 33844	
TITLE	D	<input type="checkbox"/> Delete
NAME	MURRAY, SAM	
STREET ADDRESS	586 ELLISON PKY	
CITY-ST-ZIP	HAINES CITY FL	
TITLE	VSTD	<input checked="" type="checkbox"/> Delete
NAME	KIDD, DONNA	
STREET ADDRESS	619 ELLISON PKWY	
CITY-ST-ZIP	HAINES CITY FL 33844	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MURPHY, RICHARD	
STREET ADDRESS	635 ELLISON PKY	
CITY-ST-ZIP	HAINES CITY FL 33844	
TITLE	T	<input type="checkbox"/> Delete
NAME	HULSEY, CAROL	
STREET ADDRESS	691 ELLISON PKY	
CITY-ST-ZIP	HAINES CITY FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	TONY SERGIN	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ELLISON PKWY	
STREET ADDRESS	HAINES CITY FL	
CITY-ST-ZIP	(PRES)	
TITLE	SAM MURRAY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	586 ELLISON PKWY	
STREET ADDRESS	HAINES CITY FL	
CITY-ST-ZIP	(V-PRES)	
TITLE	RUTH WILLIAMS	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	632 ELLISON PKWY	
STREET ADDRESS	HAINES CITY FL	
CITY-ST-ZIP	(SEC)	
TITLE	APRIL MURRAY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	586 ELLISON PKWY	
STREET ADDRESS	HAINES CITY FL	
CITY-ST-ZIP	(TRES)	
TITLE	CAROL HULSEY	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	691 ELLISON PKWY	
STREET ADDRESS	HAINES CITY FL	
CITY-ST-ZIP	(Dir)	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP	(Dir)	

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: APRIL MURRAY  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

863-421-5276

CFE037 (9/99)