

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000001528

1. Entity Name

MYSTIC PINES HOMEOWNER'S ASSOCIATION, INC.

FILED
May 03, 2001 8:00 am
Secretary of State

05-03-2001 90922 041 *****61.25

Principal Place of Business

2170 RESERVE PARK TR
PORT ST LUCIE FL 34986
US

Mailing Address

2170 RESERVE PARK TR
PORT ST LUCIE FL 34986
US

2. Principal Place of Business

7312 MYSTIC WAY

Suite, Apt. #, etc.

3. Mailing Address

7312 MYSTIC WAY

Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

PORT ST LUCIE FL

City & State

PORT ST LUCIE FL

4. FEI Number

65-0568721

Applied For

Not Applicable

Zip

34986

Country

USA

Zip

34986

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

JARA, STEPHEN J
2170 RESERVE PARK TRACE
PORT ST LUCIE FL 34986

7. Name and Address of New Registered Agent

Name GERALD T. CULKIN

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

7312 MYSTIC WAY

City

PORT ST LUCIE FL

Zip Code

34986

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

Gerald T. Culklin - GERALD T CULKIN PD 4/26/01

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	SD	☒ Delete
NAME	ZUMPARO, CAROL	
STREET ADDRESS	7302 MYSTIC WAY	
CITY-ST-ZIP	PORT ST LUCIE FL 34986	
TITLE	VD	☐ Delete
NAME	DEERING, DANIEL	
STREET ADDRESS	7233 MYSTIC WAY	
CITY-ST-ZIP	PORT ST LUCIE FL 34986	
TITLE	D	☐ Delete
NAME	STAVROS, WILLIAM	
STREET ADDRESS	7308 MYSTIC WAY	
CITY-ST-ZIP	PORT ST LUCIE FL 34986	
TITLE	TD	☐ Delete
NAME	MARINO, DENO	
STREET ADDRESS	2160 RESERVE PARK TRACE	
CITY-ST-ZIP	PORT ST LUCIE FL	
TITLE	PD	☐ Delete
NAME	CULKIN, GERALD	
STREET ADDRESS	7312 MYSTIC WAY	
CITY-ST-ZIP	PORT ST LUCIE FL 34986	
TITLE	D	☒ Delete
NAME	BURNS, NANCY	
STREET ADDRESS	7232 MYSTIC WAY	
CITY-ST-ZIP	PORT ST LUCIE FL 34986	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	SD	☐ Change ☒ Addition
NAME	OWEN, BARBARA	
STREET ADDRESS	7227 MYSTIC WAY	
CITY-ST-ZIP	PORT ST LUCIE FL 34986	
TITLE	D	☒ Change ☐ Addition
NAME	DEERING, DANIEL	
STREET ADDRESS	7233 MYSTIC WAY	
CITY-ST-ZIP	PORT ST LUCIE FL 34986	
TITLE	D	☐ Change ☒ Addition
NAME	JAMES COOPER	
STREET ADDRESS	7313 MYSTIC WAY	
CITY-ST-ZIP	PORT ST LUCIE FL 34986	
TITLE	VD	☐ Change ☒ Addition
NAME	WILBUR SOUTHARD	
STREET ADDRESS	7230 MYSTIC WAY	
CITY-ST-ZIP	PORT ST LUCIE FL 34986	
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:

SIGNATURE GERALD T CULKIN PD

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/26/01 561-489-0542

CR2E037 (10/00)