

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000003953

1. Entity Name

GREEN HILL FARMS OWNERS ASSOCIATION, INC.

FILED
Jan 24, 2001 8:00 am
Secretary of State

01-24-2001 90031 018 ****61.25

Principal Place of Business

7328-F W UNIVERSITY AVE
GAINESVILLE FL 32607

Mailing Address

7328-F W UNIVERSITY AVE
GAINESVILLE FL 32607

2. Principal Place of Business

240-D NW 76th Drive

3. Mailing Address

240-D NW 76th Drive

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Gainesville, FL 32607

City & State

Gainesville, FL 32607

4. FEI Number

59-3248871

Applied For

Not Applicable

Zip

Country

32607

US

Zip

Country

32607

US

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HODOR, HOWARD
7328-F W UNIVERSITY AVE
GAINESVILLE FL 32607

7. Name and Address of New Registered Agent

Name Howard Hodor

Street Address (P.O. Box Number is Not Acceptable)
240-D NW 76th Drive

City Gainesville, FL 32607 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

1-15-01

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 NAME STREET ADDRESS CITY-ST-ZIP	D HODOR, HOWARD 7328-F W UNIVERSITY AVE GAINESVILLE FL 32607	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHAW, JAMES 13505 NW 88TH PL ALACHUA FL 32615	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, HILARY M 4528 SW 83RD DR GAINESVILLE FL 32608	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hodor, Howard 240-D NW 76th Drive Gainesville, FL 32607	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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**

1-15-01 352-331-9949

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Nexttime Phone #

CR2E037 (10/00)