

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 09, 2001 8:00 am
Secretary of State

01-23-2001 90034 035 ****61.25

DOCUMENT # N94000005002

1. Entity Name

SPANISH OAKS SECTION IIHV CONDOMINIUM ASSOCIAT

Principal Place of Business

2582 DELMARET DRIVE
TITUSVILLE FL 32780
US

Mailing Address

2582 DELMARET DR.
TITUSVILLE FL 32780
US

2. Principal Place of Business

2552 Demaret Dr

3. Mailing Address

2552 Demaret Dr

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Titusville FL

City & State

Titusville FL

Zip

32780

Country

Zip

32780

Country

Brevard

4. FEI Number

59-2319030

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

WILL, FERN
2552 DEMARET DR
TITUSVILLE FL 32780

7. Name and Address of New Registered Agent

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

Fern Hill

1/10/01

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 PD
NAME ZELL, WILLIAM
STREET ADDRESS 2582 DELMARET DRIVE
CITY-ST-ZIP TITUSVILLE FL ☐ Delete

TITLE TD
NAME BARBOUR, JEFFREY
STREET ADDRESS 2584 DEMARET DRIVE
CITY-ST-ZIP TITUSVILLE FL 32780 ☐ Delete

TITLE SD
NAME EDWARDS, FARTH
STREET ADDRESS 2566 DEMARET DR
CITY-ST-ZIP TITUSVILLE FL 32780 ☒ Delete

TITLE VP
NAME FERN, WILL
STREET ADDRESS 2552 DEMARET DRIVE
CITY-ST-ZIP TITUSVILLE FL 32780 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Vice-President
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D Secretary
NAME Bobbie Duodenau
STREET ADDRESS 2562 Demaret Dr
CITY-ST-ZIP Titusville FL 32780 ☐ Change ☒ Addition

TITLE President
NAME
STREET ADDRESS
CITY-ST-ZIP ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ 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)(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 links empowered.

SIGNATURE:

Jeffrey W. Barbour REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

321-867-2548

CR2037 (10/00)