2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N94000005695

1. Entity Name

BRENTWOOD FARMS PROPERTY OWNERS ASSOCIATION, INC

FILED
Feb 28, 2000 8:00 am
Secretary of State
02-28-2000 90196 042 ****61.75

Principal Place of Business	Mailing Address
2050 N. BWD CIRCLE LECANTO FL 34461	2050 N. BWD CIRCLE LECANTO FL 34461

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
2476 N. ESSEX AVE.	2476 N. ESSEX AVE
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: HERNANDO FL	City & State: HERNANDO FL
Zip: 34442 Country: USA	Zip: 34442 Country:

4. FEI Number: 59-3278531 ☐ 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
ABEL, ERIC D ESQ 2476 N ESSEX AVENUE HERNANDO FL 34442	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TAMPOSI, STEPHEN A 2476 N ESSEX AVENUE HERNANDO FL 34442	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PASTOR, JOHN D 2476 N ESSEX AVENUE HERNANDO FL 34442	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SPENCE, SUZANNE 2476 N ESSEX AVENUE HERNANDO FL 34442	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AVIS M. CRAIG 2476 N. ESSEX AVENUE HERNANDO FL 34442	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BAZEMORE, LISA 2476 N ESSEX AVENUE HERNANDO FL 34442	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DONALD WINOGRAD 2820 N BRENTWOOD CIRCLE LECANTO FL 34461	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SAMUEL SCHULTZ 2692 N. BRENTWOOD CIRCLE LECANTO FL 34461	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/99)

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: S. Bazemore/LISA M BAZEMORE 2/17/00 352-746-6060
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #