2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 24, 2002 8:00 am
Secretary of State
03-24-2002 90075 002 ****61.25

DOCUMENT # N95000000129

1. Entity Name

THE HAMMOCKS AT LAKE HERON HOMEOWNERS' ASSOCIATI ON, INC.

Principal Place of Business	Mailing Address
21428 KEATING WAY LUTZ FL 33549 US	PO BOX 633 LUTZ FL 33548

800047549

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3313725 ☐ 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
FINANICAL ACCOUNTING SERVICES OF TAMPA 21438 KEATING WAY LUTZ FL 33549	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	DP GARVER, EDWARD 21421 KEATING WAY LUTZ FL 33549	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP Eshelman, Nate 21410 Keating Way Lutz, Fl 33549	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP LEVIN, LAWRENCE 21410 KEATING WAY LUTZ FL 33549	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP Rethelford, David 21442 Keating Way Lutz, Fl, 33549	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS LOWE, VICKI 21452 KENTING WAY LUTZ FL 33549	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Lundy, Dru 21443 Keating Way Lutz, Fl 33549	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT ROGERS, BETTY L 21438 KEATING WAY LUTZ FL 33549	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Magney, Karen 1447 Plover ct Lutz, Fl 33549	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D COSLOV, DEBRA 21432 KENTING WAY LUTZ FL 33549	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP SLIPPY, WILLIAM 21416 KEATING WAY LUTZ FL 33549	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Betty L Rogers REQUIRED Betty L Rogers 3-11-02 813-909-0065
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #