

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000000837

1. Entity Name

TIGER TRACE HOMEOWNERS ASSOCIATION OF GULF BREEZ

Principal Place of Business

1101 TIGER TRACE BLVD.
GULF BREEZE FL 32561
US

Mailing Address

1101 TIGER TRACE BLVD.
GULF BREEZE FL 32561-3187
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1101 Tiger Trace Blvd

PO Box 1234

Gulf Breeze FL

32561

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

59-3300074

Applied For

Not-Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

LAJTER, GARY
1101 TIGER TRACE BLVD.
GULF BREEZE FL 32561

7. Name and Address of New Registered Agent

Name

Bill Luttrell

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

1176 Jaguar Circle

City

Gulf Breeze

FL

Zip Code

32561

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

TITLE PD ☒ Delete
NAME LAJTER, GARY
STREET ADDRESS 1101 TIGER TRACE BLVD.
CITY-ST-ZIP GULF BREEZE FL 32561

TITLE VPD ☒ Delete
NAME LUTTRELL, BILL
STREET ADDRESS 1176 JAGUAR CIRCLE
CITY-ST-ZIP GULF BREEZE FL 32561

TITLE SD ☒ Delete
NAME KNIGHT, CHERYL
STREET ADDRESS 1083 TIGER TRACE BLVD.
CITY-ST-ZIP GULF BREEZE FL 32561

TITLE TD ☒ Delete
NAME WELSH, CHRISTA
STREET ADDRESS 2839 LYNX TR
CITY-ST-ZIP GULF BREEZE FL 32561

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME Bill Luttrell
STREET ADDRESS 1176 Jaguar Circle
CITY-ST-ZIP Gulf Breeze FL 32561

TITLE VPD ☒ Change ☐ Addition
NAME David Cooper
STREET ADDRESS 1182 Jaguar Circle
CITY-ST-ZIP Gulf Breeze FL 32561

TITLE SD ☒ Change ☐ Addition
NAME Grace Hofius
STREET ADDRESS 2821 Safari Court
CITY-ST-ZIP Gulf Breeze FL 32561

TITLE TD ☒ Change ☐ Addition
NAME Betty Wagner
STREET ADDRESS 1140 Jaguar Circle
CITY-ST-ZIP Gulf Breeze FL 32561

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/00

(850) 932-8072

Date

Daytime Phone #

CR2E037 (9/99)