

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000001987

1. Entity Name

DEAN POINT HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Aug 01, 2000 8:00 am**  
**Secretary of State**

08-01-2000 90005 038 \*\*\*\*70.00

Principal Place of Business

1016 DEAN POINT PL  
ORLANDO FL 32825  
US

Mailing Address

P O BOX 780556  
ORLANDO FL 32825  
US

2. Principal Place of Business

10120 Dean Point Place

3. Mailing Address

10120 Dean Point Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Orlando, Florida

City & State

Orlando, Florida

4. FEI Number

59-3342509

Applied For

Not Applicable

Zip  
32825

Country  
USA

Zip  
32825

Country  
USA

5. Certificate of Status Desired ☒

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BOYLE, DONALD  
10116 DEAN POINT PL  
ORLANDO FL 32825

7. Name and Address of New Registered Agent

Name

Ivonne Collazo

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

10120 Dean Point Place

City

Orlando

FL

Zip Code  
32825

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**  
**After September 13, 2000 min. will be \$236.25**

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 BOYLE, DONALD  
STREET ADDRESS 10116 OCEAN POINT PL  
CITY-ST-ZIP ORLANDO FL 32825

TITLE VPD ☒ Delete  
NAME ALEXANDER, LORRIE  
STREET ADDRESS 10252 DEAN POINT PL  
CITY-ST-ZIP ORLANDO FL 32825

TITLE TD ☒ Delete  
NAME DIAZ, LORENZO  
STREET ADDRESS 10140 DEAN POINT PL  
CITY-ST-ZIP ORLANDO FL 32825

TITLE SD ☒ Delete  
NAME LEON, BRENDA  
STREET ADDRESS 10231 DEAN POINT PL  
CITY-ST-ZIP ORLANDO FL 32825

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 P ☒ Change ☐ Addition  
NAME Ivonne Collazo  
STREET ADDRESS 10120 Dean Point Place  
CITY-ST-ZIP Orlando, Florida 32825

TITLE V ☒ Change ☐ Addition  
NAME Jack Eisenhut  
STREET ADDRESS 10223 Dean Point Place  
CITY-ST-ZIP Orlando, Florida 32825

TITLE T ☒ Change ☐ Addition  
NAME Brenda Leon  
STREET ADDRESS 10231 Dean Point Place  
CITY-ST-ZIP Orlando, Florida 32825

TITLE S ☒ Change ☐ Addition  
NAME Laura Bryant  
STREET ADDRESS 10109 Dean Point Place  
CITY-ST-ZIP Orlando, Florida 32825

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: BRENDA LEON TREASURER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/28/00

Date

407-381-4123

Daytime Phone #

CR2E037 (5/00)