

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Mar 21, 2003 8:00 am**  
**Secretary of State**

03-21-2003 90088 044 \*\*\*\*61.25

DOCUMENT # N95000005679

1. Entity Name

SOUTHPORT SPRINGS COMMUNITY ASSOCIATION, INC.



Principal Place of Business

~~BOLL MORRIS~~ ~~35630 CLUBBER CT~~ ~~ZEPHYRHILLS FL 33541~~ ~~US~~  
**KEN WINSLOW** **3604 RANGER PKWY** **3723 BUBBA DR.** **ZEPHYRHILLS FL 33541**

Mailing Address

**3604 RANGER PKWY** **3723 BUBBA DR.** **ZEPHYRHILLS FL 33541**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-3344105**

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

~~CAROSELLI, JON~~ ~~3511 RANGER PKWY~~ ~~ZEPHYRHILLS FL 33541~~  
**ROLAND PEREZ** **35626 CLUBBER CT** **ZEPHYRHILLS FL 33541**

Name **ROLAND PEREZ**  
Street Address (P.O. Box Number is Not Acceptable) **35626 CLUBBER CT.**  
City **ZEPHYRHILLS** FL Zip Code **33541**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Roland Perez*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**3-18-03**

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	MORRIS, BILL	
STREET ADDRESS	3604 RANGER PKWY	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	
TITLE	T	<input type="checkbox"/> Delete
NAME	QUEAR, CAROLYN	
STREET ADDRESS	3536 RANGER PKWY	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	
TITLE	D	<input type="checkbox"/> Delete
NAME	ANDERSON, EDWARD	
STREET ADDRESS	3715 BUBBA DRIVE	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	ELY, WILLIAM	
STREET ADDRESS	3620 RANGER PKWY	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	
TITLE	D	<input type="checkbox"/> Delete
NAME	GREENE, RON	
STREET ADDRESS	3452 AZINGER LOOP	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KEN WINSLOW	
STREET ADDRESS	3723 BUBBA DR.	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33541	
TITLE	SEC.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ROLAND PEREZ	
STREET ADDRESS	35626 CLUBBER CT.	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33541	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	LARRY BILSKI	
STREET ADDRESS	3712 RANGER PKYWAY	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33541	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	EUGENE ZELINSKI	
STREET ADDRESS	35652 CLUBBER CT.	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33541	
TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RON GREENE	
STREET ADDRESS	3452 AZINGER LOOP	
CITY-ST-ZIP	ZEPHYRHILLS, FL 33541	
TITLE	<del>SEC</del>	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<del>EUGENE ZELINSKI</del>	
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: *Roland Perez* REQUIRED

**3-18-03** (813) 783-9774

CR2E037 (10/02)