

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000001064

1. Entity Name

SWEETBRIAR HOMEOWNERS' ASSOCIATION, INC.

FILED

Apr 09, 2001 8:00 am  
Secretary of State

04-09-2001 90016 028 \*\*\*\*61.25

Principal Place of Business

920 THIRD ST  
STE B  
NEPTUNE BEACH FL 32266  
US

Mailing Address

920 THIRD ST  
STE B  
NEPTUNE BEACH FL 32266  
US

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

59-3367650

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75-Additional-  
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WALLACE, L. DENISE  
920 THIRD ST  
STE B  
NEPTUNE BEACH FL 32266

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 D XXX Delete  
NAME WOOD, JAMES R  
STREET ADDRESS 4729 HWY 17 S STE 204  
CITY-ST-ZIP ORANGE PARK FL 32073

TITLE TD XX Change ☐ Addition  
NAME David Reagan  
STREET ADDRESS 3669 Morning Meadow Lane  
CITY-ST-ZIP Orange Park, FL 32073

TITLE D XX Delete  
NAME STOKES, E C JR  
STREET ADDRESS 9551-4 BAYMEADOWS RD  
CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE PD XX Change ☐ Addition  
NAME Bob Bulmer  
STREET ADDRESS 3941 Heavenside Court  
CITY-ST-ZIP Orange Park, FL 32073

TITLE D XX Delete  
NAME LEIGH, SANDY JR.  
STREET ADDRESS 4729 HWY 17 S STE 204  
CITY-ST-ZIP ORANGE PARK FL 32073

TITLE 2ndVPD XX Change ☐ Addition  
NAME Antonio Ras  
STREET ADDRESS 569 Fallen Timbers Drive  
CITY-ST-ZIP Orange Park, FL 32073

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VPD ☐ Change ☐ Addition  
NAME Blake Brook  
STREET ADDRESS 577 Fallen Timbers Dr. S.  
CITY-ST-ZIP Orange Park, FL 32073

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE SD ☐ Change ☐ Addition  
NAME Joan Carroll  
STREET ADDRESS 3945 Heavenside Court  
CITY-ST-ZIP Orange Park, FL 32073

TITLE ☐ Delete  
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 registered business 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 attached list.

SIGNATURE:

ROBERT A BULMER

2-21-01

904-908-5719

SIGNATURE AND TITLE OF REGISTERING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)