

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000001228

1. Entity Name

THREE PALMS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O NORMAN STEIN
31245 THREE PALMS LN
TAVARES FL 32778

C/O NORMAN STEIN
31245 THREE PALMS LN
TAVARES FL 32778-5701

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

59-3374494

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

GERKIN, SCOTT A
C/O STONE & GERKEN, P.A.
4850 N HWY 19A
MT DORA FL 32757

Name: MAURICE HODDER

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

31229 THREE PALMS LN.

City TAVARES

FL

Zip Code 32778

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

Maurice Hodder

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/31/00
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
NAME SCHUL, RAYMOND
STREET ADDRESS 31289 THREE PALMS
CITY-ST-ZIP TAVARES FL 32778 ☐ Delete

TITLE D
NAME TOM HALE
STREET ADDRESS 31205 THREE PALMS LN
CITY-ST-ZIP TAVARES, FL 32778 ☐ Change ☒ Addition

TITLE D
NAME HODDER, MAURICE
STREET ADDRESS 31229 THREE PALMS LN
CITY-ST-ZIP TAVARES FL 32778 ☒ Delete

TITLE D
NAME MEL DE FRIEZE
STREET ADDRESS 31245 THREE PALMS LN
CITY-ST-ZIP TAVARES, FL 32778 ☐ Change ☒ Addition

TITLE P
NAME SHUTTLEWORTH, KENNETH
STREET ADDRESS 31265 THREE PALMS LN
CITY-ST-ZIP TAVARES FL 32778 ☒ Delete

TITLE D
NAME MARY TIMM
STREET ADDRESS 31273 THREE PALMS LN
CITY-ST-ZIP TAVARES, FL 32778 ☐ Change ☒ Addition

TITLE D
NAME BAILEY, RONALD
STREET ADDRESS 31210 MAYFAIR WAY
CITY-ST-ZIP TAVARES FL 32778 ☒ Delete

TITLE TREAS.
NAME JULIA PETTY
STREET ADDRESS 31277 THREE PALMS LN
CITY-ST-ZIP TAVARES, FL 32778 ☐ Change ☒ Addition

TITLE VP
NAME DONALD SWGARENGEN
STREET ADDRESS 31269 THREE PALMS LN
CITY-ST-ZIP TAVARES, FL 32778 ☐ Delete

TITLE SCLY.
NAME BEATRICE SHINER
STREET ADDRESS 31286 THREE PALMS LN
CITY-ST-ZIP TAVARES, FL 32778 ☐ Change ☒ Addition

TITLE P
NAME MAURICE HODDER
STREET ADDRESS 31229 THREE PALMS LN
CITY-ST-ZIP TAVARES, FL 32778 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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 MAURICE HODDER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-14-00

Date

352 343-8943

Daytime Phone #

CR2E037 (9/99)