2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000001563

1. Entity Name

HOMEOWNERS/RENTERS ASSOCIATION OF POINSETTIA PAR K, INC.

FILED

02 JUL 24 PM 4:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
~~25 POINSETTIA DR~~ PARK FT MYERS FL 33905	52 ~~25~~ POINSETTIA DR FT MYERS FL 33905

2. Principal Place of Business	3. Mailing Address
AS ABOVE.	ABOVE.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FT MYERS. FL.	City & State
Zip: 33905 Country: USA	Zip Country

4. FEI Number 65-0657350 ☐ 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
MURPHY, KENT F 25 POINSETTIA DR FT MYERS FL 33905	Name ~~IAN N.~~ BROWN IAN N. Street Address (P.O. Box Number is Not Acceptable) 286 EDWARDO AVE City FT MYERS. FL Zip Code 33905

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 Ian N Brown 9/04/02

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P MURPHY, KENT F 25 POINSETTIA DR FORT MYERS FL 33905	☐ Delete	TITLE ~~P~~ / NAME / STREET ADDRESS / CITY-ST-ZIP	P BROWN IAN N. 286 EDWARDO AVE FT. MYERS FL 33905 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V CLINK, ARLENE 225 N. POINSETTIA DR FT MEYERS FL 33905	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V.P. PHYLLIS WILLIAMS 222 POINSIETTA DR FT MYERS FL. 33905 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S BEALER, MILDREAD 270 W. PINSETTIA DR FORT MYERS FL 33905	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S JEANNE COUSINEAU 157 SIESTA DR FT MYERS FL. 33905 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T BREKER, EDITH 21 POINSETTIA DR. FORT MYERS FL 33905	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T. LYNNE CAHILL 52 POINSIETTA DR FT MYRS FL 33905 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GRIFFEN, DORIS 199 DOMINGO DR FT MEYERS FL 33905	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D. 1000070843T1--8 -08/14/02--01003--022 *****61.25 *****61.25 ☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GREER, JAMES 273 W. POINSETTIA DR. FORT MYERS FL 33905	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D. GERRY SILVIA 59 HACIENDA DA FT MYER FL 33905 ☑ 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 REQUIRED~~ Ian N Brown