

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000001592

FILED
Jan 18, 2002 8:00 AM
Secretary of State

Entity Name: FLORIDA FOX TROTTER ASSOCIATION, INC.

Current Principal Place of Business:

26010 APPLE BLOSSOM LANE
WESLEY CHAPEL, FL 33544

New Principal Place of Business:

Current Mailing Address:

26010 APPLE BLOSSOM LANE
WESLEY CHAPEL, FL 33544

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARREN, CATHY
26010 APPLE BLOSSOM LANE
WESLEY CHAPEL, FL 33544 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WOODWARD, JIM
Address: 4750 BLUE HERON
City-St-Zip: DE LEON SPRINGS, FL 32130

Title: VP () Delete
Name: ZACK, CHRIS
Address: 4155 LUCIANO AVENUE
City-St-Zip: COCOA, FL 32926 US

Title: S () Delete
Name: WARREN, CATHY
Address: 26010 APPLE BLOSSOM LANE
City-St-Zip: WESLEY CHAPEL, FL 33544 US

Title: T () Delete
Name: MIKELSON, TERESA
Address: 3835 S CURRY ROAD
City-St-Zip: ST AUGUSTINE, FL 32092

Title: D () Delete
Name: BLANKENSHIP, BUD
Address: 7842 SADDLE CREEK TRAIL
City-St-Zip: SARASOTA, FL 34241 US

Title: D () Delete
Name: RUENHECK, KAREN
Address: 639 SECOND AVE
City-St-Zip: WINDERMERE, FL 34786 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: HALLGREN, WENDY
Address: 16900 S.E. 272ND COURT
City-St-Zip: UMATILLA, FL 32784 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: PASCHAL, LINDA
Address: P.O. BOX 1
City-St-Zip: ONECO, FL 34264 US

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CATHY WARREN

S

01/18/2002

Electronic Signature of Signing Officer or Director

_____ Date

ROY MITCHELL-DIRECTOR
P.O. BOX 326
BARBERVILLE, FL 32105