


2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N96000002939**

1. Entity Name

THE GEORGETOWN ESTATES/WINTER PARK FOREST HOMEOW**FILED**
Jan 19, 2001 8:00 am
Secretary of State

01-19-2001 90013 041 ****61.25

0025331

| | | | | | |
|---|---|---|--|---|--|
| Principal Place of Business 3125 RAIDERS RUN WINTER PARK FL 32792 US | | Mailing Address PO BOX 4303 WINTER PARK FL 32793 US | | C0005609  DO NOT WRITE IN THIS SPACE | |
| 2. Principal Place of Business Suite, Apt. #, etc. | | 3. Mailing Address Suite, Apt. #, etc. | | | |
| City & State | | City & State | | | |
| Zip | | Country | | 4. FEI Number 59-2804384 | |
| 5. Certificate of Status Desired <input type="checkbox"/> | | 5. Certificate of Status Desired <input type="checkbox"/> | | Applied For Not Applicable | |
| 6. Name and Address of Current Registered Agent DEBOER, CHRISTINA 3125 RAIDERS RUN WINTER PARK FL 32792 | | 7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____ | | | | | |
| FILE NOW: FEE IS \$61.25 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> | | \$5.00 May Be Added to Fees | |
| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | PD ADAMS, MELISSA 3239 HEATHERBROOK WINTER PARK FL 32792 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | D Lisa Haber 820 Garrett Winter Park, FL 32792 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | VD ROMEO, PAT 3231 HEATHERBROOK WINTER PARK FL 32792 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | SD ROMEO, BARBARA 3231 HEATHERBROOK WINTER PARK FL 32792 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | TD DEBOER, CHRISTINA 3125 RAIDERS RUN WINTER PARK FL 32792 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D ETHERIDGE, BRUCE 832 APPALACHEE WINTER PARK FL 32792 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 832 Appalachee | | |
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | D BEATTY, PAUL 620 COACHLIGHT WAY WINTER PARK FL 32792 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> 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: Christina M DeBoer 1/9/00 (407) 672-0118
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (10/00)