2001 UNIFORM BUSINESS REPORT (UBR)

Apr 11, 2001 8:00 am Secretary of State DOCUMENT # N9600003860 04-11-2001 90014 046 ****61.25 SPRINGFIELD HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 3298 SUMMIT BLVD.. STE 4 3298 SUMMIT BLVD., STE 4 PENSACOLA FL 32503 PENSACOLA FL 32503 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3425292 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Etheridge Street Address (P.O. Box Number is Not Acceptable) 3298 Summy 1810d CAMPUS, JOSEPH J III 3298 SUMMIT BLVD., STE. 18 PENSACOLA FL 32503 Zip Code City 8. The above named entity submits this statement for the purpose of charging its registered office or registered agent, or both, in the state of Florida. **SIGNATURE** Make Check Payable to FILE NOW: 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Department of State Added to Fees **FEE IS \$61.25** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD PD **Addition** Delete ☐ Change TITLE TITLE 2001 TwHle MICHAEL, JEFF NAME NAME 3298 Summit Blud. Ele 18 STREET ADDRESS STREET ADDRESS 3298 SUMMIT BLVD., STE 18 Pensacola Fl. 32503 CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32503 STD Change ☐ Addition ☐ Defete TITI F TITLE MCINNIS, ALLEY NAME NAME STREET ADDRESS 3298 SUMMIT BLVD., STE 18 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP PENSACOLA FL 32503 TITLE ☐ Delete TITLE ☐ Change ☐ Addition FRANZ JON NAME STREET ADDRESS 3298 SUMMIT BLVD., STE-18 STREET ADDRESS CITY-ST-ZIP PENSACOLA FL 32503 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-\$T-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP 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 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

with all other like empowered

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RERINITIANE

changed, or on an attachment with an

SIGNATURE: LANCE