2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N96000005079

Entity Name: BUCKHORN RIDGE HOMEOWNERS ASSOCIATION, INC.

FILED Apr 25, 2002 8:00 AM Secretary of State

Current Pi	rincipal Place of Bus	siness:	New Prince	New Principal Place of Business:			
325 S. BLV			3974 TAM	PA ROAD			
TAMPA, FL 33611			B OLDSMAF	B OLDSMAR, FL 34677			
Current Mailing Address:			New Maili	New Mailing Address:			
325 S. BLVD TAMPA, FL 33611				PO BOX 2157 OLDSMAR, FL 34677			
FEI Number:	59-3407836 FEI No	umber Applied For() FEI	Number Not App	licable ()	Certificate of Status Des	ired ()	
Name and	Address of Current	Registered Agent:	Name and	Address of Ne	w Registered Agent	::	
HANSON, 325 S. BLV TAMPA, FI	′D.		3974 TAM B	HANSON, JACK B 3974 TAMPA ROAD B OLDSMAR, FL 34677			
	named entity submits of Florida.	this statement for the purpos	se of changing i	its registered offi	ce or registered ager	it, or both,	
SIGNATURE:					04/25/2002		
	Electronic Sign	ature of Registered Agent			Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD () Delete PETERS, LEN 1842 S. RIDGE DR. VALRICO, FL 33594		Title: Name: Address: City-St-Zip:	()C	hange()Addition		
Title: Name: Address: City-St-Zip:	VPD () Delete BOOKER, MATT 4322 BROOKE DR. VALRICO, FL 33594		Title: Name: Address: City-St-Zip:	D (X) C BOOHER, MATT 4322 BROOKE DI VALRICO, FL 338			
Title: Name: Address: City-St-Zip:	STD () Delete CAMERON, THERESA 1816 S, RIDGE DR. VALRICO, FL 33594		Title: Name: Address: City-St-Zip:	() C	hange()Addition		
Title: Name: Address: City-St-Zip:	S () Delete ADAMS, CECIL 4314 CROSS RIDGE DE VALRICO, FL 33594	₹.	Title: Name: Address: City-St-Zip:	D (X) C ADDAMS, CECIL 4314 CROSS RID VALRICO, FL 339			
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	DVP () C KEEFE, DON 4304 BRANDON F VALRICO, FL 33			
Title: Name: Address: City-St-Zip:	() Delete		Title: Name: Address: City-St-Zip:	D ()C BURNETT, JANIC 1808 PALM RIDG VALRICO, FL 338	E PLACE		

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: LEN PETERS DP 04/25/2002

NANCY JOHNSON 4303 BRANDON RIDGE DRIVE VALRICO FL 33594

BRUCE EPPS D 1822 SOUTH RIDGE DRIVE VALRICO FL 33594

NIGEL DAVIS D 4409 BRANDON RIDGE DRIVE VALRICO FL 33594