

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000005261

1. Entity Name

THE CARROLL COMMUNITY DEVELOPMENT ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2810 CHATSWORTH LANE
LAKELAND FL 33813

P.O. BOX 6189
LAKELAND FL 33807-6189

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3405617

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

STUART, JANET M
ONE LAKE MORTON DRIVE
LAKELAND FL 33801

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

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: VD
NAME: HENDERSON, STEVE
STREET ADDRESS: 5107 HIGHLAND DRIVE, EAST
CITY-ST-ZIP: LAKELAND FL 33813
☒ Delete

TITLE: Vice President
NAME: Nonie Watson
STREET ADDRESS: 6221 Lyn Mar Drive
CITY-ST-ZIP: Lakeland FL 33813
☐ Change ☒ Addition

TITLE: ~~OPB~~ Secretary
NAME: AUTRY, DONNA S
STREET ADDRESS: 2810 CHATSWORTH LANE
CITY-ST-ZIP: LAKELAND FL 33813
☐ Delete

TITLE: Secretary
NAME: Autry, Donna S
STREET ADDRESS: 2810 Chatsworth Lane
CITY-ST-ZIP: Lakeland FL 33813
☒ Change ☐ Addition

TITLE: D
NAME: MATHEWS, RANDY
STREET ADDRESS: 502 DON EL STREET
CITY-ST-ZIP: LAKELAND FL 33813
☐ Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE: D
NAME: MCDONOUGH, CHERYL
STREET ADDRESS: 8544 TOMOKA RUN
CITY-ST-ZIP: LAKELAND FL 33810
☒ Delete

TITLE: President
NAME: Linda Gilliard
STREET ADDRESS: 4125 Rolling Grove PL
CITY-ST-ZIP: Lakeland FL 33810
☐ Change ☒ Addition

TITLE: D
NAME: WILLERS, ELIZABETH
STREET ADDRESS: 5110 LAKE-IN-THE-WOODS BLVD.
CITY-ST-ZIP: LAKELAND FL 33818
☐ Delete

TITLE:
NAME:
STREET ADDRESS:
CITY-ST-ZIP:
☐ Change ☐ Addition

TITLE:
NAME: BAILEY, ROSEMARY
STREET ADDRESS: 2601 SLEEPY HOLLOW LANE
CITY-ST-ZIP: LAKELAND FL 33810
☒ Delete

TITLE: Treasurer
NAME: Cary J. Inderbitzin
STREET ADDRESS: 540 Peninsula Dr.
CITY-ST-ZIP: Lakeland FL 33813
☐ 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: Linda Gilliard
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Linda Gilliard 4/10/02 863/614-4394

FILED
Apr 22, 2002 8:00 am
Secretary of State

04-22-2002 90170 041 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)