

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 01, 2003 8:00 am
Secretary of State

05-01-2003 90794 028 ****61.25

DOCUMENT # N97000002297

1. Entity Name

MORGAN'S HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

**MORGAN'S MH PARK
04059-32 PICCIOLA ROAD
FRUITLAND PARK FL 34731
US**

Mailing Address

**MORGAN'S MH PARK
04059-32 PICCIOLA ROAD
FRUITLAND PARK FL 34731
US**

10094722



☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-3440062**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PHILLIPS, MARY KAYE
04059-32 PICCIOLA RD
FRUITLAND PARK FL 34731**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MADDOX, COVA	
STREET ADDRESS	04059-35 PICCIOLA RD	
CITY-ST-ZIP	FRUITLAND PARK FL 34731	
TITLE	VD	<input type="checkbox"/> Delete
NAME	FARRELL, OWEN	
STREET ADDRESS	04059-17 PICCIOLA RD	
CITY-ST-ZIP	FRUITLAND PARK FL 34731	
TITLE	SD	<input type="checkbox"/> Delete
NAME	PHILLIPS, MARY KAYE	
STREET ADDRESS	04059-32 PICCIOLA ROAD	
CITY-ST-ZIP	FRUITLAND PARK FL 34731	
TITLE	TD	<input type="checkbox"/> Delete
NAME	SEE, CATHY	
STREET ADDRESS	04056-10 PICCIOLA RD	
CITY-ST-ZIP	FRUITLAND PARK FL 34731	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Mary Kaye Phillips* **MARY KAYE PHILLIPS**

4-24-03

352-789-9300

CR2E037 (10/02)