

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

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90387 006 ****61.25

DOCUMENT # N97000003989

1. Entity Name

THE CROWN POINTE PROPERTY OWNERS ASSOCIATION, IN C.



Principal Place of Business

PO BOX 3340
PENSACOLA FL 32516-3340

Mailing Address

PO BOX 3340
PENSACOLA FL 32516-3340

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 **59-3712107**

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

NEWMAN, RAYMOND F JR.
348 MIRACLE STRIP PARKWAY, S.W.
SUITE 7
FORT WALTON BEACH FL 32548

Name

HENRY C. MARSHALL

Street Address (P.O. Box Number is Not Acceptable)

912 WINE POINTE DR.

PENSACOLA

City

FL

Zip Code

32506

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

Henry C. Marshall

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3-27-03

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VD	☒ Delete
NAME	WARD, TONY G	
STREET ADDRESS	7966 CASTLE POINTE WAY	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE	PD	☐ Delete
NAME	MARSHALL, HENRY C	
STREET ADDRESS	912 WINE POINTE DRIVE	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE	STD	☐ Delete
NAME	PATTON, RUTH E	
STREET ADDRESS	1004 JAMIE DR	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE	D	☐ Delete
NAME	CASERLY, RORY	
STREET ADDRESS	8050 CASTLE POINTE WAY	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE	D	☐ Delete
NAME	BEVILLE, FRANK	
STREET ADDRESS	894 STERLING WAY	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE	D	☒ Delete
NAME	BROMEN, PETER	
STREET ADDRESS	7970 CASTLE POINTE WAY	
CITY-ST-ZIP	PENSACOLA FL 32506	

TITLE	Timothy Nickler	VD	☐ Change	☒ Addition
NAME	868 Sterling Way			
STREET ADDRESS	Pensacola, FL 32506			
CITY-ST-ZIP				
TITLE	Ellen Benton	D	☐ Change	☒ Addition
NAME	1012 JAMIE DR			
STREET ADDRESS	Pensacola, FL 32506			
CITY-ST-ZIP				
TITLE	John Erickson	D	☐ Change	☒ Addition
NAME	901 Wine Pointe Dr			
STREET ADDRESS	Pensacola, FL 32506			
CITY-ST-ZIP				
TITLE	Cassedy, Rory	D	☒ Change	☐ Addition
NAME	8050 Castle Pointe Way			
STREET ADDRESS	Pensacola, FL 32506			
CITY-ST-ZIP				
TITLE	Byron Bauer	D	☐ Change	☐ Addition
NAME	7931 Castle Pointe Way			
STREET ADDRESS	Pensacola, FL 32506			
CITY-ST-ZIP				
TITLE			☐ Change	☐ 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:

Timothy Nickler

4/2/03 850-457-8328

CR2E037 (10/02)