

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

N97000004009

1. Entity Name

Spring Harbor Homeowners Association, Inc.

Principal Place of Business

Mailing Address

2. Principal Place of Business

491 N. State Road 434

3. Mailing Address

P.O. Box 160580

Suite, Apt. #, etc.  
125

Suite, Apt. #, etc.

City & State

Altamonte Springs, FL

City & State

Altamonte Springs, FL

4. FEI Number

59-3493840

Applied For

Not Applicable

Zip

32714

Country

US

Zip

32716-0580

Country

US

5. Certificate of Status Desired

☐

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

A0075003

6. Name and Address of Current Registered Agent

Meridythe Kanaga  
491 N. State Road 434  
Suite 125  
Altamonte Springs, FL 32714

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)  
491 N. State Road 434

Suite 125

City

Altamonte Springs

FL

Zip Code

32714

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

*Meridythe Kanaga*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

6/8/01

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

|                |                       |                                            |
|----------------|-----------------------|--------------------------------------------|
| TITLE          | DPT                   | <input checked="" type="checkbox"/> Delete |
| NAME           | Honey, Richard        |                                            |
| STREET ADDRESS | 3 Brook Avenue        |                                            |
| CITY-ST-ZIP    | Kinsale, VA 22488     |                                            |
| TITLE          | DVP                   | <input checked="" type="checkbox"/> Delete |
| NAME           | Ronca, Louis G.       |                                            |
| STREET ADDRESS | 205 Honeysuckle Drive |                                            |
| CITY-ST-ZIP    | Longwood, FL 32779    |                                            |
| TITLE          | DS                    | <input checked="" type="checkbox"/> Delete |
| NAME           | Lazarus, Randall C.   |                                            |
| STREET ADDRESS | 300 Wild Olive Lane   |                                            |
| CITY-ST-ZIP    | Longwood, FL 32779    |                                            |
| TITLE          |                       | <input type="checkbox"/> Delete            |
| NAME           |                       |                                            |
| STREET ADDRESS |                       |                                            |
| CITY-ST-ZIP    |                       |                                            |
| 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          | DP                    | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Randy Arnold          |                                                                              |
| STREET ADDRESS | 20 Frisco Court       |                                                                              |
| CITY-ST-ZIP    | Apopka, FL 32712      |                                                                              |
| TITLE          | DVP                   | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Al Suarez             |                                                                              |
| STREET ADDRESS | 59 Jett Loop          |                                                                              |
| CITY-ST-ZIP    | Apopka, FL 32712      |                                                                              |
| TITLE          | DS                    | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Sheila Greene-Biskner |                                                                              |
| STREET ADDRESS | 43 Justin Drive       |                                                                              |
| CITY-ST-ZIP    | Apopka, FL 32712      |                                                                              |
| TITLE          | DT                    | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Heather Comer         |                                                                              |
| STREET ADDRESS | 66 Jett Loop          |                                                                              |
| CITY-ST-ZIP    | Apopka, FL 32712      |                                                                              |
| TITLE          | D                     | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Paul Evans            |                                                                              |
| STREET ADDRESS | 1372 Honey Road       |                                                                              |
| CITY-ST-ZIP    | Apopka, FL 32712      |                                                                              |
| TITLE          | D                     | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME           | Gregory Schmidt       |                                                                              |
| STREET ADDRESS | 2 Frisco Court        |                                                                              |
| CITY-ST-ZIP    | Apopka, FL 32712      |                                                                              |

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

407/862-2292

CR2E037 (11/00)

Attachment  
OFF NO 70000004009  
A0075003

# SPRING HARBOR HOMEOWNERS ASSOCIATION, INC.

June 8, 2001

Department of State  
Uniform Business Report  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

This is page two of our 2001 Uniform Business Report for Spring Harbor  
HOA, Federal ID# 59-3493840 to add one more director to our corporation:

|              |                  |
|--------------|------------------|
| Title:       | D                |
| Name:        | Burt Stout       |
| Address:     | 7 Justin Drive   |
| City-ST-Zip: | Apopka, FL 32712 |