

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N97000005338

1. Entity Name

EBAN'S PRESERVE HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Mar 11, 2002 8:00 am**  
**Secretary of State**

03-11-2002 90023 019 \*\*\*\*61.25

Principal Place of Business

% MID-FLORIDA PROP. MGMT  
5025 SOUTH US HWY 17-92  
CASSELBERRY FL 32707

Mailing Address

C/O MID-FLORIDA PROP MGMT  
5025 SOUTH US HWY 17-92  
CASSELBERRY FL 32707

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

59-3471502

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

SPARE, WILLIAM C  
C/O MID-FLORIDA PROP MGMT  
5025 SOUTH US HWY 17-92  
CASSELBERRY FL 32707

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

TITLE DT ☒ Delete  
NAME SMITH, DEBORAH  
STREET ADDRESS 605 CALADESI TRAIL  
CITY-ST-ZIP ORLANDO FL 32807

TITLE DV ☐ Delete  
NAME DYE, JERRY  
STREET ADDRESS 6725 BELMAR DRIVE  
CITY-ST-ZIP ORLANDO FL 32807

TITLE D ☐ Delete  
NAME IRIZARRY, RONALD  
STREET ADDRESS 526 BEASLEY COURT  
CITY-ST-ZIP ORLANDO FL 32807

TITLE DP ☐ Delete  
NAME KATZ, ARLENE  
STREET ADDRESS 760 PENLON COURT  
CITY-ST-ZIP ORLANDO FL 32807

TITLE DS ☐ Delete  
NAME GARCIA, THOMARY  
STREET ADDRESS 766 PENLON COURT  
CITY-ST-ZIP ORLANDO FL 32807

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DT ☐ Change ☒ Addition  
NAME DYE WINONA  
STREET ADDRESS 6725 BELMAR DRIVE  
CITY-ST-ZIP ORLANDO FL 32807

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

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

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

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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: W. DYE W. DYE 02/26/02

CR2E037 (9/01)