**FILED** 

7-6-0/ 4/07-277-3398

## **2001 UNIFORM BUSINESS REPORT (UBR)**

changed, or on an attachment with an address, with all of

SIGNATURE:

## Jul 12, 2001 8:00 am Secretary of State DOCUMENT # N9800000404 1. Entity Name 07-12-2001 90001 006 \*\*\*\*61.25 UNIVERSITY VILLAGE MOBILE HOMEOWNERS' ASSOCIATIO Principal Place of Business Mailing Address 2149 SCRANTON AVENUE 2009 SCRANTON AVENUE 40076645 LOT # 308 LOT # 350 ORLANDO FL 32826 ORLANDO FL 32826 2. Principal Place of Business 3. Mailing Address 1921 Scranton Avenue Suite, Apt. #, etc. Lot # 184 Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-3498559 Orlando, FLorida Not Applicable Country \$8.75 Additional 32826 5. Certificate of Status Desired Orange Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) PERRY, DANIEL W 1920 E ROBINSON STREET ORLANDO FL 32803 Zip Code City 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) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Pavable to \$5.00 May Be Trust Fund Contribution. After September 12, 2001, min, will be \$236.25 Added to Fees Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. (2/01) TITLE ☐ Delete ☐ Change Addition TITLE HEITZMAN, OLA M NAME NAME 1850 ANNAPOLIS AVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP ORLANDO FL 32826 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE FRAZZITA, JOSEPH NAME NAME STREET-ADORESS 1921 SCRANTON AVENUE STREET ADDRESS CITY\_ST\_ZIP\_ ORLANDO:FL:32826: CITY-ST-7IP\_ TITLE □ Delete TITLE ☐ Addition NUNN, ANN NAME NAME 2149 SCRANTON AVE STREET ADDRESS STREET ADDRESS CITY-ST-7IP ORLANDO FL 32826 CITY-ST-ZIP Delete ☐ Change TITLE TITLE ☐ Addition **BOWLING. ROBIN** J.C. Edwards NAME NAME STREET ADDRESS 1961 SCRANTON AVENUE STREET ADDRESS 2009 Scranton Avenue City-St-ZIP ORLANDO FL 32826 CITY-ST-7IP Orlando, FLorida 32826 TITLE Delete TITLE □ Change Addition PIERCE, ROBERT NAME NAME AL Radcliff STREET ADDRESS 1877 MARQUETTE DRIVE STREET ADDRESS 2040 Scranton Avenue CITY-ST-ZIP ORLANDO FL 32826 CITY-ST-7IP Orlando, FLorida TITLE ☐ Delete TITLE ☐ Change ☐ Addition BRATTON, NORMA NAME NAME STREET ADDRESS 2047 WAKE FOREST DR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL 32826 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