

FILED  
Mar 18, 2003 8:00 am  
Secretary of State

02-12-2003 90123 021 \*\*\*\*61.25

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

DOCUMENT # N98000000445

1. Entity Name  
BLACK BEAR RANCH PROPERTY OWNERS ASSOCIATION, INC.



Principal Place of Business  
880 SW 20TH COURT  
DELRAY BEACH FL 33445

Mailing Address  
880 SW 20TH COURT  
DELRAY BEACH FL 33445

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0932658

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

Name

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

City

FL

Zip Code

STORCH, GLENN D ESQUIRE  
420 SOUTH NOVA ROAD  
DAYTONA BEACH FL 32114

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  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
STD  
COLE, TRISH  
880 SW 20TH COURT  
DELRAY BEACH FL 33445

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
GRANT, KRISTY  
821 BUCKLES ROAD  
PIERSON FL 32180

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VPD  
ROWE, STAN  
571 CHERRY STREET  
DAYTONA BEACH FL 32119

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
STD  
COLE, TRISH  
880 SW 20TH CT  
DELRAY BEACH FL 33445

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PRESIDENT  
STAN ROWE  
571 CHERRY ST  
DAYTONA BEACH FL 32119

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VPD  
TED HOPPE  
860 BUCKLES RD  
PIERSON FL 32180

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

Change Addition

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 #

2/10/03 501-278-4153

CR2E037 (10/02)