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

DOCUMENT # N98000002023

1. Entity Name

FIELDSTREAM NORTH HOMEOWNERS ASSOCIATION, INC.



FILED Apr 24, 2003 8:00 am Secretary of State

Principal Place of Business 444 W NEW ENGLAND AVE STE B WINTER PARK FL 32789

Mailing Address

444 W NEW ENGLAND AVE STE B

WINTER PARK FL 32789

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|------------------------------|----------------------------|--|--|
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| 2. Principal F | Place of Business ACESON AVE | 3 Mailing Address 882 JACKSON AUE | | | I NDBINAFA BAR TRAKK TOKKA BAKKI BRAKI BOKKA BOKKA BOKKA TADIK BOKKA ALDODA NIKA KADA | | | | | | |
|--------------------------------|---|--|--|--|---|------------------------------|-------------------------------|----------------------------|--|--|--|
| Suite, Apt. | | Suite, Apt. #, etc. | | | | CHECK HERE IF MAKING CHANGES | | | | | |
| City & Stat | () | Winter PA | RK | FL | 4. FEI Number 50 | 3508548 | <u> </u> | plied For at Applicable | | | |
| 3 2 7 8 9 | Country USA | 37189 | Country USA | | 5. Certificate of St | atus Desired | \$8.75 Add Fee Require | | | | |
| | 6. Name and Address of Current R | بر حبيب | | 7. Name and Address of New Registered Agent | | | | | | | |
| | | Name | Name | | | | | | | | |
| DAVIS, M | | Street / | Street Address (P.O. Box Number is Not Acceptable) | | | | | | | | |
| 444 W NEW ENGLAND AVE STE B | | | | | | | | | | | |
| | PARK FL 32789 | 885 | 882 JACKSON AUE | | | | | | | | |
| THINE | 1744CT E 02703 | | L City | sto P | Page | F | | ያዳ | | | |
| 8. The above | named entity submits this statement for | the purpose of changing its r | registered office of | or registere | ed agent, or both, in | the State of Florida. I a | am familiar with, | and accept | | | |
| the obligat | tions of registered agent. | | | | | | | | | | |
| | | | | | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent an | d title if applicable. (NOTE: | Registered Agent signs | sture required | when reinstating) | DAT | | | | | |
| | organica, typos of plants and a logistical agent at | - The Happingson | Trogistoro Figure 3.9 | | THOM TO HOLD AND THE | | <u> </u> | | | | |
| | | 9. Election Cam | naign Financing | Financing \$5.00 May Be Make Check Paya | | | eck Pavahle | to | | | |
| ŧ | FILE NOW: FEE IS \$61.25 | Trust Fund Co | | | \$5.00 May Be Make Check Payable to Added to Fees Florida Department of State | | | | | | |
| | *** **: | | | | | <u> </u> | | | | | |
| 1,0. | OFFICERS AND DIRE | CTORS | 11. | | | | | | | | |
| TITLE | VD | Delete | TITLE | trè | cubado, | Director | Change | ☐ Addition | | | |
| NAME | RUCABADO, FERNANDO | | NAME | Ru | .cubado; p | ernando | | | | | |
| STREET ADDRESS CITY-ST-ZIP | 332 FRESHWATER COVER ORLANDO FL 32825 | | STREET ADDRESS CITY-ST-ZIP | | | | | ļ | | | |
| TITLE | SD SD | □ Delete | TITLE | Vio | e Pres./ | | Change | Addition | | | |
| NAME | BISZICK, MERYL | C Delete | NAME | Dis- | zick, Meryl | Director | Onlinge | | | | |
| STREET ADDRESS | 327 FRESHWATER COURT | | STREET ADDRESS | 0.5. | 21027 (116131 | | | | | | |
| CITY-ST-ZIP | ORLANDO FL-32825 | The same of the sa | ≂: - CITY-ST-ZIP-↑ | والمستعدد | - | | | , | | | |
| TITLE | PD | ☐ Delete | TITLE | | | | ☐ Change | ☐ Addition | | | |
| NAME | YOUNG, DAVID | | NAME | } | | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | 10630 CREEL COURT ORLANDO FL 32825 | | STREET ADDRESS CITY-ST-ZIP | | | | | | | | |
| TITLE | TD | PST Delete | TITLE | | | | Change | ☐ Addition | | | |
| NAME | BARTH, OLIVIE | Delete | NAME | | | | C Change | ☐ Mudition | | | |
| STREET ADDRESS | 118 FIELDSTREAM NORTH BLVD | | STREET ADDRESS | | | | | | | | |
| CITY-ST-ZIP | ORLANDO FL 32825 | | CITY-ST-ZIP | | | | | | | | |
| TITLE | D . | ∑ Delete | TITLE | | | | ☐ Change | ☐ Addition | | | |
| NAME | TORRES, HECTOR | · | NAME | | | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | 10881 Brown Trout CT Orlando FL 32825 | | STREET ADDRESS CITY-ST-ZIP | | | | | j | | | |
| | | □ B-late | | D | | | ☐ Change | Addition | | | |
| TITLE NAME | | ☐ Delete | TITLE NAME | Deie | call mike | _ | ∟ c∩ange | ★ Addition | | | |
| STREET ADDRESS | lu . * uzeel utr | • | STREET ADDRESS | 1061 | scoll, mike | C+. | | | | | |
| CITY-ST-ZIP | n 2 3 2 5 3 2 2 5 | • | CITY-ST-ZIP | Orl | ando, E | 328 25 | | | | | |
| 40 I basabas | artifus that the information as and and solution as | is filling door not availful a | | todio C | | -i-l- Chan be 14 alesen | a a stife of the of the order | fermation | | | |

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:

WOULD PESSIFIED april 2003

CR2E037 (10/02)