

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 27, 2001 8:00 am
Secretary of State

04-27-2001 90267 019 ****61.25

DOCUMENT # N98000003380

1. Entity Name

Regency Place Homeowners Association, Inc.

Principal Place of Business

5695 Beggs Road,
 Suite B-100
 Orlando, FL 32810

Mailing Address

5695 Beggs Road,
 Suite B-100
 Orlando, FL 32810

00004304

2. Principal Place of Business

5695 Beggs Road

3. Mailing Address

5695 Beggs Road,

Suite, Apt. #, etc.

Suite B-100

Suite, Apt. #, etc.

Suite B-100

DO NOT WRITE IN THIS SPACE

City & State

Orlando, FL

City & State

Orlando, FL

4. FEI Number

59-3518982

Applied For

Not Applicable

Zip

32810

Country

USA

Zip

32810

Country

USA

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

Harkley R. Thornton, Esq.
 5695 Beggs Road, Suite b-100
 Orlando, FL 32810

7. Name and Address of New Registered Agent

Name

Theresa Sutherland

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

5695 Beggs Road

Suite B-100

City

Orlando

FL

Zip Code
 32810

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

Theresa Sutherland

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4-18-01

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	James Hofford M. Jr.	
STREET ADDRESS	111 W. Robinson St.,	
CITY-ST-ZIP	Orlando, FL 32801	
TITLE	VD	<input type="checkbox"/> Delete
NAME	Derek Sutton	
STREET ADDRESS	111 W. Robinson St.	
CITY-ST-ZIP	Orlando, FL 32801	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	Dan Willett	
STREET ADDRESS	111 W. Robinson St.	
CITY-ST-ZIP	Orlando, FL 32801	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PD	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	George Glance		
STREET ADDRESS	111 W. Robinson St.		
CITY-ST-ZIP	Orlando, FL 32801		
TITLE	TD	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE	SD	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Sonya Nicholson		
STREET ADDRESS	111 W. Robinson St.		
CITY-ST-ZIP	Orlando, FL 32801		
TITLE	VD	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
NAME	Anthony Lanciano		
STREET ADDRESS	111 W. Robinson St.		
CITY-ST-ZIP	Orlando, FL 32801		
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME			
STREET ADDRESS			
CITY-ST-ZIP			

CR2E034 (11/00)

13. 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 supplementary 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other duly empowered.

SIGNATURE:

Theresa Sutherland

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-18-01