

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N98000003799**

1. Entity Name

REGENCY HEIGHTS HOMEOWNERS ASSOCIATION, INC.**FILED****Mar 31, 2000 8:00 am**
Secretary of State

03-31-2000 90045 037 ****61.25

Principal Place of Business

Mailing Address

2550 STATE ROAD 580. LOT 372
CLEARWATER FL 33761**2550 STATE ROAD 580. LOT 372**
CLEARWATER FL 33761-4915

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3522104

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE



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)

City

FL

Zip Code

~~CHUMING, ANSLEY~~ **HUPPMAN, JOAN**
2550 STATE ROAD 580, LOT 372
CLEARWATER FL 33761

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 \$61.259. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees**Make Check Payable to**
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☒ Delete
NAME **HUPPMAN, JOSEPH**
STREET ADDRESS **2550 ST RD 580 LOT 372**
CITY-ST-ZIP **CLEARWATER FL 33761**TITLE **VP** ☐ Delete
NAME **FREELAND, CHARLES**
STREET ADDRESS **2550 ST RD 580 LOT 267**
CITY-ST-ZIP **CLEARWATER FL 33761**TITLE **S** ☐ Delete
NAME **CIUROS, WILLIAM**
STREET ADDRESS **2550 ST RD 580 LOT 429**
CITY-ST-ZIP **CLEARWATER FL 33761**TITLE **T** ☒ Delete
NAME **CUMMINS, ANSLEY**
STREET ADDRESS **2550 ST RD 580 LOT 293**
CITY-ST-ZIP **CLEARWATER FL 33761**TITLE **D** ☒ Delete
NAME **CRAIG, ROBERT**
STREET ADDRESS **2550 ST RD 580 LOT 266**
CITY-ST-ZIP **CLEARWATER FL 33761**TITLE **D** ☒ Delete
NAME **CRAIG, ROBERT**
STREET ADDRESS **2550 ST RD 580 LOT 253**
CITY-ST-ZIP **CLEARWATER FL 33761**TITLE **PRES.** ☐ Change ☐ Addition
NAME **CIUROS, WILLIAM**
STREET ADDRESS **2550 ST RD 580 #429**
CITY-ST-ZIP **CLEARWATER FL 33761**TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE **S** ☐ Change ☐ Addition
NAME **ANGELA MATERO**
STREET ADDRESS **2550 ST RD 580 #464**
CITY-ST-ZIP **CLEARWATER FL 33761**TITLE **TR** ☐ Change ☐ Addition
NAME **JOAN HUPPMAN**
STREET ADDRESS **2550 ST RD 580 #372**
CITY-ST-ZIP **CLEARWATER FL 33761**TITLE **D** ☐ Change ☐ Addition
NAME **LEO VITALS**
STREET ADDRESS **2550 ST RD 580 #453**
CITY-ST-ZIP **CLEARWATER FL 33761**TITLE **D** ☐ Change ☐ Addition
NAME **MARILYN KELSEY**
STREET ADDRESS **2550 ST RD 580 #254**
CITY-ST-ZIP **CLEARWATER FL 33761**

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:

Joan Huppmann, Treasurer
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR**3/27/2000**
Date**727-997-8545**
Daytime Phone #

CR2E037 (9/99)