2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000005521

1. Entity Name

AZALEA OAKS PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business 1080 FORREST DRIVE BARTOW FL 33830 Mailing Address

1080 FORREST DRIVE BARTOW FL 33830

BARTOW FL 33830		BARTOW F	BARTOW FL 33830							
						1 188 1110 1110 11				
2. Principal P	lace of Business	3. Mailing	3. Mailing Address							
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.				DO NOT WRITE IN THIS SPACE			
City & State	e	City &	City & State			4. FEI Number Applied For Not Applicable				
Zip Country			Zip		ntry	S. Certificate of Status Desired				
6. Name and Address of Current Registered Agent				<u> </u>		7. Name and Address of New Registered Agent				
	6. Name and Address of Curre	ni negistered A	gent		Name	7. Halle allo Auc	ileas of New Tregistered	Ageilt		
RADFORD	. KATHY				Street Addres	ss (P.O. Box Number is	Not Acceptable)			
	REST DRIVE					· ···		***		
BARTOW I			_			City Zip Code				
7					City		FI	_ Zip Coo	е	
8. The above	named entity submits this statement	for the purpose	of changing its	registere	ed office or regi	stered agent, or both, in	the State of Florida. I am	familiar with	and accept	
	ions of registered agent.	/ /		•			0	1 1.		
•	Valley Hola	110	. X				91	コクノカつ		
SIGNATURE MAINTENANCE SIGNATURE								402	<u> </u>	
,	Signal dre, typed or plinter name of registered age	ent and title if applicat	ile. (NOTE	Registered	d Agent signature req	uired when reinstating)				
	1 1								_	
After September 13, 2002, 9. Election Campaign F						\$5.00 May Be	Make Chec	-		
	min. will be \$236.25.	* :	Trust Fund C	ontributi	on. \square	Added to Fees	Departme	ent of State	'	
10.	OFFICERS AND I	DIRECTORS		11.		ADDITIONS/CHANG	L. RES TO OFFICERS AND D	IRECTORS IN	10	
TITLE	PD	31112010110	☐ Delete	TITLE				☐ Change	Addition	
NAME	MANNING, KAREEM		_ Boitte	NAMI	1			_ `		
STREET ADDRESS	495 FORREST DRIVE			STRE	ET ADDRESS					
CITY-ST-ZIP	BARTOW FL			CITY	-ST-ZIP					
TITLE	VD		☐ Delete	TITLE				☐ Change	☐ Addition	
NAME	JOHNSON, TOMMY		.	NAMI	E	•-				
STREET ADDRESS	495 FORREST DRIVE			STRE	ET ADDRESS					
CITY-ST-ZIP	BARTOW FL 33830			CITY	-ST-ZIP					
TITLE	SD		Delete	TITLE				Change	☐ Addition	
NAME	HARVEY, KATRINA			NAM						
STREET ADDRESS	495 FORREST DRIVE				ET ADDRESS					
CITY-ST-ZIP	BARTOW FL 33830				-ST-ZIP				- Adams	
TITLE	T DINITO DEMANDA		Delete	TITLE				Change	Addition	
NAME	JOINER, DEWANDA			NAMI						
STREET ADDRESS CITY-ST-ZIP	495 FORREST DRIVE				ET ADDRESS - ST- ZIP					
	BARTOW FL 33830 RA			-				☐ Change	Addition	
TITLE	RADFORD, KATHY		Delete	TITLE				□ Change	☐ Addition (
NAME STREET ADDRESS .	1080 FORREST DRIVE			8	ET ADDRESS					
CITY-ST-ZIP	BARTOW FL 33830				-ST-ZIP	,				
TITLE	DIRECTOR OF COMPA		☐ Delete	TITLE		, , , , , , , , , , , , , , , , , , ,		☐ Change	Addition	
NAME			L Delete	NAMI	~					
STREET ADDRESS					ET ADDRESS					
CITY-ST-ZIP				CITY-	-ST-ZIP					

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 attach them with an address with all other like empowered.

SIGNATURE:

9/12/02

FILED Sep 16, 2002 8:00 am Secretary of State

09-16-2002 90098 049 ****69.50

05-28-2002 91619 015 ****69.50