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

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1. Entity Nam		-					
THE VILLAGE OF BLACK BEAR RESERVE HOMEOWNERS ASS OCIATION, INC.					FILED 04 FEB 20 PH 12: 13		
Principal Place of Business Mail		Mailing Address	Mailing Address		FEB 20 PHIZ.	*	
505 WEKIVA SPRINGS RD., STE. 800		505 WEKIVA SPRINGS RD	505 WEKIVA SPRINGS RD., STE. 800		STATE		
500 LONGWOOD FL 32779		500			SECRETARY OF STATE SECRETARY OF STATE LIAMING TALL A HASSEE, FLORIDA		
LONGWOOD FI	L 32//9	LONGWOOD FL 32779			NETONA DOLEN DOLEN DOLEN BRAIR TAIDA (III	10 XIOIX DIJE 10 81	
2. Principal Place of Business		3. Mailing Address	3. Mailing Address		IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			HECK HERE IF MAKING CHANG	3-04	
; City & State		City & State	City & State		4. FEI Number 59-3543215		
Zip	Country	Zip	Country	5. Certificate of Sta	tus Desired	Additional	
6. Name and Address of Current Registered Agent			1	7. Name and Address of New Registered Agent			
·····	V. 14110 4110 7441100 01 4411		Name_				
JURGENS	S, J.A. ESQ	والمراوية فيستعن بالمستهدد والمتناهم ومتناها والمتناد		Richard E.			
	IVA-SPRINGS RD., STE. 800.		Sileet Addie	33 (T.O. DOX Number is 14	ot Acceptable)		
LONGWO	OOD FL 32779		5	55 E. Pine Street			
			City			Code 2801	
. The -b				rlando			
	nameB entity submits this statementions of registered agent.	nt for the purpose of changing its	registered office or regi	istered agent, or both, in ti	ne State of Florida. I am familiar w	nin and accept	
-	v.		illh	<i>t.</i>	.1.	OlaH	
SIGNATURE .	Richard E. Lars		1.56/	10	41	9107	
	Signature, typed or printed name of registered as	gent and title if applicable. (NOT	E: Registered Agent signature re	quired when reinstating)	DATE		
						_	
	FILE NOW: FEE IS \$61.25		npaign Financing	\$5.00 May Be	Make Check Payal		
	tember 10, 2003, min will be		· · · -	\$5.00 May Be Added to Fees	Make Check Payal Florida Department		
	•	\$236.25 Trust Fund C	· · · -	Added to Fees		of State	
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After Sept 10. TITLE SAME	OFFICERS AND DPS CARSON, MARK	Trust Fund C	11. TITLE NAME	Added to Fees ADDITIONS/CHANGE	Florida Department of STO OFFICERS AND DIRECTOR	S IN 10	
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SIGNATURE: BELLEVILLE REPORTER +032 DIR. DRC 1-63 467-934-167