2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 07, 2001 8:00 am
Secretary of State
05-07-2001 90063 031 ****61.25

DOCUMENT # N98000007034

1. Entity Name
MONTEOCHA CREEK, UNITS I AND II PROPERTY OWNERS' ASSOC, INC.

A0062470

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
2831 NW 41st St. Suite D Gainesville, FL 32606	2831 NW 41st St., Suite D Gainesville, FL 32606

2. Principal Place of Business	3. Mailing Address
2831 NW 41st Street	2831 NW 41st Street
Suite, Apt. #, etc.: Suite D	Suite, Apt. #, etc.: Suite D
City & State: Gainesville, FL	City & State: Gainesville, FL
Zip: 32606 Country: US	Zip: 32606 Country: US

4. FEI Number: 59-3647940 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
THOMPSON, C. FREDERICK 2831 NW 41st St., Suite D Gainesville, FL 32606	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. 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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD THOMPSON, C. FREDERICK 2831 NW 41st St., Suite D GAINESVILLE FL 32601	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPSD ROSKO, GEORGE 2831 NW 41st St., Suite D GAINESVILLE FL 32601	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DUKES, JOYCE L 2831 NW 41st St., Suite D GAINESVILLE FL 32601	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (9/99)

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: _____ 04/24/01 325-278-4814
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #
C. FREDERICK THOMPSON, PRESIDENT