

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

**FILED**  
**Mar 10, 2003 8:00 am**  
**Secretary of State**

03-10-2003 90122 023 \*\*\*\*61.25

**DOCUMENT # N99000000379**

1. Entity Name

**LAUREL OAK PARK HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business

**3711 CORTEZ ROAD WEST  
BRADENTON FL 34210**

Mailing Address

**3711 CORTEZ ROAD WEST  
BRADENTON FL 34210**

2. Principal Place of Business

**4400 El Conquistador**  
Suite, Apt. #, etc.

3. Mailing Address

**4400 El Conquistador**  
Suite, Apt. #, etc.



☐ CHECK HERE IF MAKING CHANGES

City & State

**Bradenton FL**

City & State

**Bradenton FL**

4. FEI Number **65-0888843**

Applied For

Not Applicable

Zip

**34210**

Country

**USA**

Zip

**34210**

Country

**USA**

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**HEIN, PRISCILLA G**

**3711 CORTEZ ROAD WEST  
BRADENTON FL 34210**

7. Name and Address of New Registered Agent

Name **Harmony Management**  
Street Address (P.O. Box Number) **4400 El Conquistador Pkwy**

City **Bradenton** FL Zip Code **34210**

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. I am familiar with, and accept the obligations of registered agent.

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 \$61.25**

**5110**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	<b>DE</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>BYRNES, KAREN</b>	
STREET ADDRESS	<b>3711 CORTEZ ROAD WEST</b>	
CITY-ST-ZIP	<b>BRADENTON FL 34210</b>	
TITLE	<b>D</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>HEIN, PRISCILLA G</b>	
STREET ADDRESS	<b>3711 CORTEZ ROAD WEST</b>	
CITY-ST-ZIP	<b>BRADENTON FL 34210</b>	
TITLE	<b>STD</b>	<input checked="" type="checkbox"/> Delete
NAME	<b>NEAL, PATRICK K</b>	
STREET ADDRESS	<b>3711 CORTEZ ROAD W</b>	
CITY-ST-ZIP	<b>BRADENTON FL 34210</b>	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<b>DIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BAUER Samuel</b>	
STREET ADDRESS	<b>1305 86th Ct NW</b>	
CITY-ST-ZIP	<b>Bradenton FL 34209</b>	
TITLE	<b>DVP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>GREAVES Lori</b>	
STREET ADDRESS	<b>1507 86th Ct NW</b>	
CITY-ST-ZIP	<b>Bradenton FL 34209</b>	
TITLE	<b>SD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>CATINEAU Carole</b>	
STREET ADDRESS	<b>8603 11th Av NW</b>	
CITY-ST-ZIP	<b>Bradenton FL 34209</b>	
TITLE	<b>TD</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>MOYER John</b>	
STREET ADDRESS	<b>8616 15th Ave NW</b>	
CITY-ST-ZIP	<b>Bradenton FL 34209</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>CLULOW Jill</b>	
STREET ADDRESS	<b>1608 86th St NW</b>	
CITY-ST-ZIP	<b>Bradenton FL 34209</b>	
TITLE	<b>D</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>MONTAGANA Ronald</b>	
STREET ADDRESS	<b>1306 86th Ct NW</b>	
CITY-ST-ZIP	<b>Bradenton FL 34209</b>	

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:

**Lori Greaves**

**3-5-03**

CR2E037 (10/02)

ATTACHMENT

LAUREL OAK PARK HOMEOWNERS ASSOCIATION, INC.

10035228  
N990000000379

*Please reply to:*  
**HARMONY MANAGEMENT**  
4400 El Conquistador Pkwy.  
Bradenton, FL 34210  
(941) 758-9624

Additional Board Member for N99000000379 Laurel Oak Park

Director  
Willard McVey  
1301 86<sup>th</sup> Court NW  
Bradenton FL 34206