2000 UNIFORM BUSINESS REPORT (UBR)

5

DOCUMENT # N99000002033

1. Entity Name

DEVON PARK MASTER OWNERS' ASSOCIATION, INC.

FILED
Jun 29, 2000 8:00 am
Secretary of State

05-16-2000 90034 046 ****61.25

Principal Place of Business	Mailing Address
541 S. ORLANDO AVE., STE. 210 MAITLAND FL 32751	541 S. ORLANDO AVE., STE. 210 MAITLAND FL 32751-5669

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
201 N. New York Ave.	201 N. New York Ave.
Suite, Apt. #, etc.: Suite 200	Suite, Apt. #, etc.: Suite 200
City & State: Winter Park, FL	City & State: Winter Park, FL
Zip: 32789 / Country: US	Zip: 32789 / Country: US

4. FEI Number: Applied For — ☐ 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
HOEKSEMA, DOUGLAS A 541 S. ORLANDO AVE., STE. 210 MAITLAND FL 32751	Name: Street Address (P.O. Box Number is Not Acceptable): 201 N. New York Ave., Suite 200 City: Winter Park, FL Zip Code: 32789

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 $61.25	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	P ☒ Delete	TITLE	PD ☐ Change ☒ Addition
NAME	MULHALL, MICHAEL J	NAME	Hoeksema, Douglas A.
STREET ADDRESS	541 S. ORLANDO AVE., STE. 210	STREET ADDRESS	201 N. New York Ave., Suite 200
CITY-ST-ZIP	MAITLAND FL 32751	CITY-ST-ZIP	Winter Park, FL 32789
TITLE	VD ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	GAHERTY, ROBERT	NAME	
STREET ADDRESS	541 S. ORLANDO AVE., STE. 210	STREET ADDRESS	201 N. New York Ave., Suite 200
CITY-ST-ZIP	MAITLAND FL 32751	CITY-ST-ZIP	Winter Park, FL 32789
TITLE	STD ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	ZANOWICK, JOAN	NAME	
STREET ADDRESS	541 S. ORLANDO AVE., STE. 210	STREET ADDRESS	201 N. New York Ave., Suite 200
CITY-ST-ZIP	MAITLAND FL 32751	CITY-ST-ZIP	Winter Park, FL 32789
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

CR2E037 (9/99)

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: SIGNATURE REQUIRED 4/27/00 407-975-6126
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #