

**04 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED

04 APR 22 PM 12:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N99-2571
1. Entity Name
DORAL VILLAGE HOME ~~OWNER~~ TENANT ASSOC. INC.

DO NOT WRITE IN THIS SPACE

66415715

2. Principal Place of Business 29250 US19 N
Suite, Apt. #, etc.
3. Mailing Address 29250 US19 N
Suite, Apt. #, etc. # 481

DO NOT WRITE IN THIS SPACE

City & State CLEARWATER, FL City & State CLEARWATER, FL
Zip 33761-2141 Country USA Zip 33761-2141 Country USA

4. FEI Number 593572553 Applied For
Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name SUSAN K. SCHAFFER
Street Address (P.O. Box Number is Not Acceptable)
29250 US19 N # 481
City CLEARWATER FL Zip Code 33761

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: Susan K. Schaffer Susan K. Schaffer 04-14-04
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS \$61.25
Initial or Amended UBR

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

TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>PRESIDENT SUSAN K. SCHAFFER</u> <u>29250 US19 N # 481</u> <u>CLEARWATER, FL 33761</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>VICE PRESIDENT</u> <u>ROD CADY</u> <u>CLEARWATER, FL 33761</u> <u>29250 US19 N # 178</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>SECRETARY</u> <u>JUDY BOWKER</u> <u>29250 US19 N # 298</u> <u>CLEARWATER, FL 33761</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>TREASURER</u> <u>PRISCILLA BERRY</u> <u>29250 US19 N # 195</u> <u>CLEARWATER, FL 33761</u>
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<u>MEMBERSHIP SECRETARY</u> <u>JEAN DAUIS</u> <u>29250 US19 N #</u> <u>CLEARWATER FL 33761</u>
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CR2E037B (12/01)

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE: Susan K. Schaffer 04-14-04 727-789-0343
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date Daytime Phone #