

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002985

1. Entity Name

DEERFIELD COMMUNITY ASSOCIATION OF TOWN N COUNTR
Y INC.

Principal Place of Business

Mailing Address

P.O. BOX 260296
TAMPA FL 33685-0269

P.O. BOX 260296
TAMPA FL 33685-0269

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3452620

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

SEEBECH, GAIL A
8313 W HILLSBOROUGH AVE
SUITE 120
TAMPA FL 33615

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

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 PD ☐ Delete
NAME SEEBECH, GAIL A
STREET ADDRESS 8809 ASCOT CT N
CITY-ST-ZIP TAMPA FL 33634

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD ☐ Delete
NAME PINKERTON, EARL
STREET ADDRESS 8908 RICHFIELD CT
CITY-ST-ZIP TAMPA FL 33634

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE VPD ☒ Delete
NAME PINKERTON, EARL
STREET ADDRESS 8908 RICHFIELD CT.
CITY-ST-ZIP TAMPA FL 33634

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☐ Delete
NAME WULFF, MARTHA
STREET ADDRESS 8506 WILLOW FOREST CT.
CITY-ST-ZIP TAMPA FL 33634

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE Treasurer ☐ Change ☒ Addition
NAME Rick Wyatt
STREET ADDRESS 8906 Rocky Run Court
CITY-ST-ZIP Tampa FL 33634

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-12-02

813-290-8003

CR2E037 (9/01)



DO NOT WRITE IN THIS SPACE