

# 2000 UNIFORM BUSINESS REPORT (UBR) Page

**FILED**

**Mar 02, 2000 8:00 am**  
**Secretary of State**

03-02-2000 90044 010 \*\*\*\*61.25

**DOCUMENT # N99000004294**

1. Entity Name

**PERDIDO MANOR PROPERTY OWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**1051 PARADISE LANE  
PENSACOLA FL 32506**

**P.O. BOX 3181  
PENSACOLA FL 32516-3181**

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

**59-3603004**

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

**HARTIGAN, CRAIG  
1041 PERDIDO MANOR DRIVE  
PENSACOLA FL 32506**

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

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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**C/D**  
**MICHAEL J. DONOVAN**  
**1051 PARADISE LANE**  
**PENSACOLA, FL 32506**

**R/D**  
**CRAIG HARTIGAN**  
**1041 PERDIDO MANOR DRIVE**  
**PENSACOLA, FL 32506**

**S**  
**BONNIE HMEIDI**  
**1090 PERDIDO MANOR DRIVE**  
**PENSACOLA, FL 32506**

**T/D**  
**BENJAMIN HOLCOMB**  
**1041 PERDIDO MANOR DRIVE**  
**PENSACOLA, FL 32506**

**D**  
**VICKI FAGAN**  
**13440 SCRENNITY CIRCLE**  
**PENSACOLA, FL 32506**

**D**  
**NABIL HMEIDI**  
**1090 PERDIDO MANOR DRIVE**  
**PENSACOLA, FL 32506**

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: **MICHAEL J. DONOVAN** *M. J. Donovan* **11/4/00 850-453-2696**

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807041

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DO NOT WRITE IN THIS SPACE

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CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☒ Addition  
D CHARLES H. HENDERSON  
5569 CHARBAR RD  
PENSACOLA, FL 32526

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☒ Addition  
D KATHI SCHUMACHER  
1137 PERDIDO MANOR DRIVE  
PENSACOLA, FL 32506

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

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

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