2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 15, 2002 8:00 am
Secretary of State
05-23-2002 90027 035 ****70.00

DOCUMENT # N99000004636

1. Entity Name

ABBEY GLEN HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
101-1 N.W. 75TH ST. GAINESVILLE FL 32607	101-1 N.W. 75TH ST. GAINESVILLE FL 32607

97212

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
P.O. Box 140502	P.O. Box 140502
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Gainesville FL	City & State: Gainesville FL
Zip: 32614 Country: Alachua	Zip: 32614 Country: Alachua

4. FEI Number 59-3597075 ☐ 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
MACOR REALTY 10404 SW 24TH AVE GAINESVILLE FL 32607	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PVST PLA, JOHN M 101-1 N.W. 75TH ST. GAINESVILLE FL 32607	☒ Delete	PT Macalindong, Ben 1430 NW 116th Way Gainesville, FL 32606	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PLA, JOHN M 101-1 N.W. 75TH ST. GAINESVILLE FL 32607	☒ Delete	TD Mueller, Leza 1707 SW 108th St. Gainesville, FL 32607	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOWARD, AMY 101-1 N.W. 75TH ST. GAINESVILLE FL 32607	☒ Delete	SD Banfield, Shelly 1618 SW 108th St. Gainesville, FL 32607	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHNSON, CARL L 4421 N.W. 39TH AVE., BLDG. 1, STE. 2 GAINESVILLE FL 32606	☒ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP PUGH, MERRILL L 101 NW 75 STREET #1 GAINESVILLE FL 32607	☒ Delete	VP Byrkolbotn, Svein 4000 NW 51st St., #B-40 Gainesville, FL 32606	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

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 _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #