

# 2000 UNIFORM BUSINESS REPORT (UBR)

3/

DOCUMENT # N99000004988

1. Entity Name

NATIONAL VILLAGE/ TIMBER PINE HOMEOWNERS ASSOCIA

**FILED**  
**May 03, 2000 8:00 am**  
**Secretary of State**

03-07-2000 90112 031 \*\*\*\*61.25

Principal Place of Business

1901 W. 23RD ST.  
RIVIERA BEACH FL 33404-1810

Mailing Address

1901 W. 23RD ST.  
RIVIERA BEACH FL 33404-1810

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

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

LEONARD, WARRIE D  
1901 W. 23RD ST.  
RIVIERA BEACH FL 33404-1810

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

TITLE	PRESIDENT	"D" <input type="checkbox"/> Delete
NAME	WARRIE D. LEONARD	1/20/00
STREET ADDRESS	1901 W. 23rd St.	
CITY-ST-ZIP	Riviera Beach, FL 33404	
TITLE	VICE PRESIDENT	"D" <input type="checkbox"/> Delete
NAME	DAVID WOODSIDE	1/20/00
STREET ADDRESS	2641 W. 28th St.	
CITY-ST-ZIP	Riviera Beach, FL 33404	
TITLE	SECRETARY	"D" <input type="checkbox"/> Delete
NAME	BLANCA CROCKAM	1/20/00
STREET ADDRESS	2356 Z AVENUE	
CITY-ST-ZIP	Riviera Beach, FL 33404	
TITLE	ASSISTANCE SECRETARY	"D" <input type="checkbox"/> Delete
NAME	CHARISSE MAYFIELD	1/20/00
STREET ADDRESS	2650 W. 28th St.	
CITY-ST-ZIP	Riviera Beach, FL 33404	
TITLE	TREASURER	"D" <input type="checkbox"/> Delete
NAME	BARBARA WILSON	1/20/00
STREET ADDRESS	2612 W. 28th St.	
CITY-ST-ZIP	Riviera Beach, FL 33404	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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 of 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 fees empowered.

SIGNATURE:

WARRIE D. LEONARD

1-20-2000

561-848-3615

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)