## 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9900007672

## TEN OAKS HOMEOWNERS ASSOCIATION, INC.



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Principal Place of Busin	ress	Mailing Address	Mailing Address							
441 CORTEZ ROAD WEST BRADENTON FL 34207		441 CORTEZ ROAD WES BRADENTON FL 34207	441 CORTEZ ROAD WEST BRADENTON FL 34207							
		•			2				MANUAL PROPERTY.	
2. Principal Place of Business		3. Mailing Address	3. Mailing Address			P'				
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
City & State		City & State			4. FEI Number				plied For t Applicable	
Zip Country		Zip	Country	y	5. Certificate of	of Status Desired		8.75 Add se Required		
6. Na	me and Address of Curr	ent Registered Agent				7. Name and Address of New Registered Agent				
•			1	Varrie ·					• '	
REHA, DARRELL L				Street Address (P.O. Box Number is Not Acceptable)						
441 CORTEZ ROA BRADENTON FL 3										
DIADEITION I C S	7201		[7	City			FL	Zip Code	•	
8. The shove named s	otity submits this stateme	nt for the purpose of changing i	ts registered (	office or register	red agent, or both	, in the state of Flo	rida.			
<b>3.</b> 1115 45070 7121100 C	this occurred the occurre	разрато от т д д.		•	_	,				
SIGNATURE	ped or printed name of registered i	spent and title if applicable. (NC	OTE: Registered Ag	ent signature required	d when reinstating)	·	DATE		<del></del>	
	ppo or printed rates or registered to									
FILE NOW: FEE IS \$61.25		9. Flection Campaid	9. Election Campaign Financing \$5.		20 vou 80	, Mak	e Check Pa	avable to	,	
			Trust Fund Contribution.			\$5.00 May Be Make Check Payable to Department of State				
,										
10.	OFFICERS AND		11.		ADDITIONS/CHA	NGES TO OFFICE			10	ත
πιε		☐ Delete	TITLE	B				Unange - ·	Addition	CR2E037 (9/99)
NAME CITIET ADDRESS			NAME STREET A		IA, DARREL					2
STREET ADDRESS CITY-ST-ZIP	•		CITY-ST	JID   447	S 441 CORTEZ ROAD WEST BRADENTON FL 34207					띭
			TITLE	BRA				Change	Addition	S.
TITLE NAME	NAA		NAME	100	N SIDER	25	سوريد.			
STREET ADDRESS			STREET A	DDRESS 44/	CORTE	RORO U	UE 51		Ì	
City-SI-ZIP			CITY-ST	ZIP BR	ADENTON	) FL 38	1207			
TITUE -		☐ Delete	TITLE	D	-	LORO U FL 39 EARCY LOAO	~ ·	Change	Addition	
NAME			NAME	HEI	RMAN =	EARCY	ومرس			
STREET ADDRESS		ن محمد	STREET A	ODRESS 441	CORTE	ROAD	ひとコノ	J		
CITY-ST-ZIP			City-sr	BET	ADENTO	W-FL-			Addition .	
TITLE		☐ Delete	TITLE NAME					☐ Change	L Addition	
NAME STREET ADDRESS			STREET A	ODRESS		ı				
CITY-ST-ZIP			CITY-ST	Į.					h	
		Delete	TITLE					☐ Change	Addition	
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STREET ADDRESS			STREET A	DDRESS					j	
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TITLE		☐ Delete	TITLE					Change	☐ Addition	
NAME			NAME						ĺ	
STREET ADDRESS			STREET A	i i						
CITY-ST-ZIP	<u>, ,</u>	CITY-ST			<u> </u>					
		Control of the Property of the Control of the Contr		tion stated in C.	antion 110 07/3Vi	Florida Statutes i	l further carlif	v that the it	ntormation	

I nereby 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 audress, with all other like empowered.

SIGNATURE:

(941) 753-6868