

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 732987

1. Entity Name

ICHETUCKNEE RIVER ESTATES HOMEOWNERS' ASSOCIATIO

FILED
Feb 22, 2000 8:00 am
Secretary of State

02-22-2000 90032 013 ****61.25

Principal Place of Business 28010 29TH RD BRANFORD FL 32008 US	Mailing Address PO BOX 490 P O BOX 490 FT WHITE FL 32038-0490 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address <i>P.O. Box 85</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State <i>Branford, FL</i>	
Zip	Country	Zip <i>32008</i>	Country

4. FEI Number 59-1783828	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

MANN, WILLIAM
 1468 VALLEY RD
 LAKE CITY FL 32025

7. Name and Address of New Registered Agent

Name: *HERTEL, George R.*
 Street Address (P.O. Box Number is Not Acceptable): *28010 29th Road*
 City: *Branford* FL Zip Code: *32008*

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: *George R. Hertel* (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)
 DATE: *1/26/00*

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	MANN, WILLIAM C	
STREET ADDRESS	1468 VALLEY RD	
CITY-ST-ZIP	LAKE CITY FL 32025	
TITLE	VD	<input type="checkbox"/> Delete
NAME	WINKLER, CAROL	
STREET ADDRESS	28082	
CITY-ST-ZIP	BRANFORD FL 32008	
TITLE	SD	<input type="checkbox"/> Delete
NAME	ROBINSON, BRUCE	
STREET ADDRESS	RT 17 BOX 2131	
CITY-ST-ZIP	LAKE CITY FL 32055	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HERTEL, GEORGE	
STREET ADDRESS	28010 29TH ROAD	
CITY-ST-ZIP	BRANFORD FL 32008	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President/Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HERTEL, George R.	
STREET ADDRESS	28010 29th Rd	
CITY-ST-ZIP	Branford, FL 32008	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Treasurer/Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rexford G. Hartley	
STREET ADDRESS	28422 River Run Rd	
CITY-ST-ZIP	Branford, FL 32008	
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 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 empowers.

SIGNATURE: *George R. Hertel* (Signature and typed or printed name of signing officer or director) DATE: *1/26/00* Daytime Phone #: *904-935-1019*

CR-11037 (04/98)