

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jan 31, 2002 8:00 am**  
**Secretary of State**

0063402

**DOCUMENT # 768329**

1. Entity Name

**OAK MEADOW CONDOMINIUM ASSOCIATION OF PENSACOLA, INCORPORATED**

01-31-2002 90208 001 \*\*\*\*61.25  
 01-31-2002 90208 002 \*\*\*\*\*8.75

Principal Place of Business

Mailing Address

7225W FAIRFIELD DR  
 PENSACOLA FL 32506  
 US

P. O. BOX 36185  
 PENSACOLA FL 32516-6185  
 US

11517



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Same as Above

SAME AS ABOVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2296537

Applied For

Not Applicable

Zip

Country

Zip

Country

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

Changed last year with paperwork  
~~BLANKENSHIP, WILLIAM~~  
~~7225 W FAIRFIELD DR~~  
~~UNIT C2~~  
~~PENSACOLA FL 32506~~  
 Buechler, Francine  
 7225 W. Fairfield Dr  
 Unit B-7  
 Pensacola, FL 32501

Name BUECHLER, FRANCINE  
 Street Address (P.O. Box Number is Not Acceptable)  
7225 W. FAIRFIELD DR.  
Unit B-7  
 City PENSACOLA, FL. FL Zip Code 32506

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 Francine Buechler Pres Francine Buechler President 1/9/2002  
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	S/D KING, DORTHEY	<input type="checkbox"/> Delete
STREET ADDRESS	7225 W. FAIRFIELD DR B-1	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE NAME	VTD BURRIS, PATSY	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	7225 W FAIRFIELD F-1	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE NAME	PTD BUECHLER, FRANCINE	<input type="checkbox"/> Delete
STREET ADDRESS	7225 W. FAIRFIELD DR. B-7	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE NAME	D MARTIN, JOSEPH	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	7225 W FAIRFIELD DR B-5	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE NAME	D REGTIMENE, JESSIE	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	7225 W. FAIRFIELD DR F-5	
CITY-ST-ZIP	PENSACOLA FL 32506	
TITLE NAME	D LYNCH, MARY	<input type="checkbox"/> Delete
STREET ADDRESS	7225 W. FAIRFIELD DR A-4	
CITY-ST-ZIP	PENSACOLA FL 32506	

TITLE NAME	TREASURER, DIRECTOR	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	{ SAME }	
CITY-ST-ZIP		
TITLE NAME	V/D Norman Heaney	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	7225 W. FAIRFIELD DR. C-6	
CITY-ST-ZIP	Pensacola, FL 32506	
TITLE NAME	PSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	{ SAME }	
CITY-ST-ZIP		
TITLE NAME	Director Jean Gracia	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	7225 W. FAIRFIELD DR. D-4	
CITY-ST-ZIP	Pensacola, FL 32506	
TITLE NAME	D SAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 empowered.

SIGNATURE: Francine Buechler Francine Buechler 1/9/2002 (850) 484-1912  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/01)