

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N96000004770

1. Entity Name

OAK HARBOR PROPERTY OWNERS ASSOCIATION, INC.

FILED
Apr 27, 2000 8:00 am
Secretary of State

04-27-2000 90611 041 ****61.25

Principal Place of Business

Mailing Address

~~2121 GRAND HARBOR BOULEVARD~~
~~VERO BEACH FL 32967~~

~~2121 GRAND HARBOR BOULEVARD~~
~~VERO BEACH FL 32967~~

~~4820 20TH AVENUE~~

~~4820 20TH AVENUE~~

2. Principal Place of Business

4820 20TH AVENUE

3. Mailing Address

4820 20TH AVENUE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

VERO BEACH, FL

City & State

VERO BEACH, FL

4. FEI Number

65-0711847

Applied For

Not Applicable

Zip
32967

Country
USA

Zip
32967

Country
USA

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

HEBERLING, LYNN M
4820 20TH AVENUE
VERO BEACH FL 32967

Name

RULE, LISA A.

Street Address (P.O. Box Number is Not Acceptable)

4820 20TH AVENUE

City

VERO BEACH

FL

Zip Code
32967

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 Lisa A. Rule LISA A. RULE 4-17-2000

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 DP ☒ Delete
NAME WIDELL, DOUGLAS
STREET ADDRESS 2121 GRAND HARBOR BLVD
CITY-ST-ZIP VERO BEACH FL 32967

TITLE DP ☐ Change ☒ Addition
NAME SCHLITT, FRANK
STREET ADDRESS 4820 20TH AVENUE
CITY-ST-ZIP VERO BEACH, FL 32967

TITLE DST ☐ Delete
NAME BYRNE, SUE C
STREET ADDRESS 2121 GRAND HARBOR BLVD
CITY-ST-ZIP VERO BEACH FL 32967

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DVP ☒ Delete
NAME FICKENGER, MARIA
STREET ADDRESS 2121 GRAND HARBOR BLVD
CITY-ST-ZIP VERO BEACH FL 32967

TITLE DVP ☐ Change ☒ Addition
NAME POWELL, BEVERLY
STREET ADDRESS 4820 20TH AVENUE
CITY-ST-ZIP VERO BEACH, FL 32967

TITLE M ☒ Delete
NAME HEBERLING, LYNN
STREET ADDRESS 4820 20TH AVE
CITY-ST-ZIP VERO BEACH FL 32967

TITLE M ☐ Change ☒ Addition
NAME RULE, LISA A.
STREET ADDRESS 4820 20TH AVENUE
CITY-ST-ZIP VERO BEACH, FL 32967

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ 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 empowered.

SIGNATURE: Lisa A. Rule LISA A. RULE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-17-2000

Date

561-778-5943

Daytime Phone #

CR2E037 (9/99)