2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 703484 1. Entity Name

FLORALTON BEACH ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O MRS. SAI 890 REEF ROA VERO BCH FL	ND .	C/O MRS. SAM BELL 890 REEF ROAD VERO BCH FL 32963-2921					DO BE 4040 OVER 100	1/ 1/1/ 1/1/ 1/1/			
2. Principal P	lace of Business	3. Mailing Address									
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			•	DO NOT WRITE IN THIS SPACE					
City & State	e	City & State			4. F	El Number	59-2388522			plied For	
Zip	Country	Zip		intry	5. C	5. Certificate of Status Desired S8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent							
BELL, SAM				Name Street Address (P.O. Box Number is Not Acceptable)							
											890 REEF
AFKO REV	ACH FL 32963			City	. 			FL	Zip Cod	e	
SIGNATURE .	Signature, typed or printed name of registered agent as FILE NOW:	nd title if applicable. (NO1			ure required when rei		Mak	DATE Ke Check F	ayable to		
	FEE IS \$61.25	Trust Fund Contrib	oution.		Added to Fe		De	epartment	of State		
10.	OFFICERS AND DIR		11.		ADDIT	IONS/CHAN	GES TO OFFICE	RS AND DIF	ECTORS IN		
TITLE	DB	☐ Delete	TITL		DB		41000		Change	Addition	
NAME	REMINGTON, PETER		NAM	ET ADDRESS	CLOPU	raci, a	1641010	,			
STREET ADDRESS CITY-ST-ZIP	815 LIVE OAK LANE			-ST-ZIP	822 1	1,50 00 1,50 0 00	Whan	2963	•		
	VERO BEACH FL 32963 DT	☐ Delete	TITL		<u> </u>	\ucc	<u> </u>	<u> </u>	☐ Change	Addition	
TITLE NAME	BELL, SUSAN	☐ Delete	NAM								
STREET ADDRESS	890 REEF ROAD		STRE	ET ADDRESS							
CITY-ST-ZIP	VERO BEACH FL 32963		CITY	-ST-ZIP							
TITLE	DS	Delete	TITL	E	1 5	_	_		Change	Addition	
NAME	GORDON, NANCY		NAM		10:4 He	NC , N	san Jah Le	.00		J	
STREET ADDRESS	725 LIVE OAK LANE			ET ADDRESS (- ST-ZIP	ጎኝ፯ ነ	رزيد و	say Ly	3 201	ጓ		
CITY-ST-ZIP	VERO BEACH FL 32963		_		<u> </u>	s bear	er x	٠ ١٥٠ <u>ټم د .</u>	☐ Change	Addition	
TITLE NAME	Partomen. Hans	☐ Delete	TITL						Change	Addition	
STREET ADDRESS				ET ADDRESS							
CITY-SI-ZIP Vero Beach, C1 32963			CITY	-ST-ZIP						ĺ	
TITLE	75	☐ Delete	TITL	E .			<u> </u>		Change	Addition	
NAME	Airhan Susan	•	NAM	Ε						(
STREET ADDRESS	122 Trac south	ane		ET ADDRESS						\	
CITY-ST-ZIP	Next Beach Fl	32963	CITY	-ST-ZIP							
TITLE	1	☐ Delete	TITL						☐ Change	☐ Addition	
NAME			NAM							Í	
• • • • • • • • • • • • • • • • • • • •				EET ADDRESS '- ST-ZIP							
CITY-ST-ZIP	· '		E GITT	At-Tit	I						

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:

Feb 25 2000

FILED

Mar 03, 2000 8:00 am Secretary of State

03-03-2000 90234 043 ****61.25