

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 11, 2003 8:00 am
Secretary of State

04-11-2003 90183 022 ****61.25

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DOCUMENT # 713290

1. Entity Name

ALDEA MAR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**500 S. PARK BLVD
#225
VENICE FL 34285**

Mailing Address

**1747 S TAMiami TRAIL
VENICE FL 34293**

2. Principal Place of Business

3. Mailing Address

**90 Keys - Caldwell
Suite, Apt. #, etc.
PO Box 1078**

Suite, Apt. #, etc.

City & State

Venice FL

Zip

Country

Zip

Country

34284 USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-1511424**

Applied For

Not Applicable

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

**CALDWELL, ANNETTE K.
1747 S TAMiami TRAIL
223
VENICE FL 34293**

Name

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

City

FL

Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **VD** ☐ Delete
NAME **WAGNER, WALT**
STREET ADDRESS **500 PARK BLVDS. # 90**
CITY-ST-ZIP **VENICE FL 34285**

TITLE **D** ☐ Change ☒ Addition
NAME **John Dunn**
STREET ADDRESS **500 Park Blvd #29**
CITY-ST-ZIP **Venice FL 34285**

TITLE **SD** ☐ Delete
NAME **BORTON, RICHARD**
STREET ADDRESS **500 PARK BLVD. S # 20**
CITY-ST-ZIP **VENICE FL 34285**

TITLE **D** ☐ Change ☒ Addition
NAME **Jackson Stager**
STREET ADDRESS **500 Park Blvd # 26**
CITY-ST-ZIP **Venice FL 34285**

TITLE **TD** ☐ Delete
NAME **ROCHFORD, RALPH**
STREET ADDRESS **500 PARK BLVD S #67**
CITY-ST-ZIP **VENICE FL 34285**

TITLE **D** ☐ Change ☒ Addition
NAME **Helen McGowan**
STREET ADDRESS **500 Park Blvd # 32**
CITY-ST-ZIP **Venice FL 34285**

TITLE **PD** ☐ Delete
NAME **HARTNETT, JOHN**
STREET ADDRESS **500 PARK BLVD S STE 79**
CITY-ST-ZIP **VENICE FL 34285**

TITLE **D** ☐ Change ☒ Addition
NAME **Allan Parker**
STREET ADDRESS **500 Park Blvd # 122**
CITY-ST-ZIP **Venice FL 34285**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☐ Change ☒ Addition
NAME **Dale Dean**
STREET ADDRESS **500 Park Blvd # 121**
CITY-ST-ZIP **Venice, FL 34284**

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:

Ralph Rochford

4/1/03

CR2E037 (10/02)