

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 23, 2000 8:00 am
Secretary of State

02-23-2000 90031 018 ****61.25

DOCUMENT # 722500

Entity Name
WILEY BY THE SEA IMPROVEMENT ASSOCIATION, INC.

00020133



DO NOT WRITE IN THIS SPACE

Principal Place of Business NAVARRE PKWY FL 32566	Mailing Address 6845 NAVARRE PKWY NAVARRE FL 32566-7420
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Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

County & State	City & State	4. FEI Number 59-1510753	Applied For Not Applicable
Country	Zip	Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

EDWARD P ESQ
 BAYOU BLVD
 12-13
 NASACOLA FL 32503

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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, 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**

OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

ED FVP HEDRICK, Larry 2479 HOUSTON CIRCLE NAVARRE FL 32566	<input type="checkbox"/> Delete
JP SB HENRY, DENNIS 2561 CRESCENT RD NAVARRE FL 32566	<input type="checkbox"/> Delete
SVP KARLSON, BRUCE 1959 SEAHAWK RD NAVARRE FL 32566	<input checked="" type="checkbox"/> Delete
TD KNOCH, KARL 2726 PGA BLVD NAVARRE FL 32566	<input checked="" type="checkbox"/> Delete
JP PD NEWTON, GEORGE 2539 3RD COURT NAVARRE FL 32566	<input type="checkbox"/> Delete
	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Kyle Shanning 6913 Turnberry Circle Navarre, FL 32566 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Tom Grimm 2740 PGA Blvd. Navarre, FL 32566 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

CR2E037 (9/99)

I certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information stated 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 on an attachment with an address, with or without other like empowered.

SIGNATURE: *[Signature]* **REQUIRED**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/16/00