

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State

0015292

DOCUMENT # 728311

1. Entity Name

650-700 BEACH ROAD CONDOMINIUM ASSOCIATION, INC.

04-01-2002 90636 019 ****61.25

Principal Place of Business Mailing Address
1 TURTLE BCH. RD. **1 TURTLE BCH. RD.**
VERO BEACH FL 32963 **VERO BEACH FL 32963**

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State City & State

Zip Country Zip Country

4. FEI Number **59-1579487** 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

BARKER, JOHN E
1 TURTLE BCH. RD.
VERO BEACH FL 32963

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.

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 Department of State

10. OFFICERS AND DIRECTORS

TITLE	DT	☐ Delete
NAME	DEYOUNG, SIDNEY	
STREET ADDRESS	700 BEACH ROAD, #248	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	AS	☐ Delete
NAME	BARKER, JOHN E.	
STREET ADDRESS	1 TURTLE BEACH ROAD	
CITY-ST-ZIP	VERO BEACH FL	
TITLE	AS	☐ Delete
NAME	LANAHAN, RICHARD	
STREET ADDRESS	1 TURTLE BEACH ROAD	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	SD	☐ Delete
NAME	GRAHAM, JOHN DR	
STREET ADDRESS	700 BEACH ROAD, #154	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	VPD	☐ Delete
NAME	GRAY, HOWARD E	
STREET ADDRESS	700 BEACH ROAD, #260	
CITY-ST-ZIP	VERO BEACH FL 32963	
TITLE	PD	☐ Delete
NAME	BROWN, WERNER C	
STREET ADDRESS	650-700 BEACH ROAD #344	
CITY-ST-ZIP	VERO BEACH FL 32963	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ Change ☐ Addition
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: *John E. Barker* **John E. Barker**

3/21/02 **772-231-1666**

CR2E037 (9/01)