

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 728696

1. Entity Name

BAYOU HOUSE APARTMENT CONDOMINIUM ASSOCIATION, I

Principal Place of Business

1650 PINETREE LANE ~~XXX~~ #301
SARASOTA FL 34236-7758

Mailing Address

1650 PINETREE LANE ~~XXX~~ #301
SARASOTA FL 34236-7758

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

59-2267282

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

DOYLE, ANNE E
1650 PINE TREE LANE #204
SARASOTA FL 34236

Name

Clark, James R.

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

1650 Pine Tree Lane #301

City

Sarasota fl. 34236

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

James R. Clark

James R. Clark Pres.

Jan. 31, 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	PD	☐ Delete
NAME	CLARK, JAMES R.	
STREET ADDRESS	1650 PINETREE LANE #301	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VPD	☒ Delete
NAME	STEIN, JULIA	
STREET ADDRESS	1650 PINE TREE LN, 203	
CITY-ST-ZIP	SARASOTA FL	
TITLE	STD	☒ Delete
NAME	DOYLE, ANNE E.	
STREET ADDRESS	1650 PINETREE LANE #204	
CITY-ST-ZIP	SARASOTA FL	
TITLE	D	☒ Delete
NAME	COLLINS, B. JEANNE	
STREET ADDRESS	1650 PINETREE LANE #102	
CITY-ST-ZIP	SARASOTA FL	
TITLE	VD	☒ Delete
NAME	RYBAK, MARY	
STREET ADDRESS	1650 PINE TREE LN #304	
CITY-ST-ZIP	SARASOTA FL	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VPD	☒ Change ☐ Addition
NAME	Collins, B. Jeanne	
STREET ADDRESS	1650 Pine Tree Lane #102	
CITY-ST-ZIP	Sarasota, Fl	
TITLE	STD	☒ Change ☐ Addition
NAME	Mock, Tris R.	
STREET ADDRESS	1650 Pine Tree Lane #101	
CITY-ST-ZIP		
TITLE	D	☒ Change ☐ Addition
NAME	Hopkins, Kate Alexander	
STREET ADDRESS	1650 Pine Tree Lane #104	
CITY-ST-ZIP		
TITLE	D.	☒ Change ☐ Addition
NAME	Doyle, Anne E	
STREET ADDRESS	1650 Pine Tree Lane #204	
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:

James R. Clark
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James R. Clark Pres. 1/31/00

Date

941-953-4851

Daytime Phone #



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)