

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 14, 2002 8:00 am
Secretary of State

03-14-2002 90004 032 ****61.25

DOCUMENT # 729599

1. Entity Name

SHADY DELL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

3135 SHADY DELL LN. BOX 152
 MELBOURNE FL 32935

Mailing Address

3135 SHADY DELL LN. BOX 152
 MELBOURNE FL 32935

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number **59-1586900**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

BARBOUR, EDWARD
3135 SHADY DELL LANE
#114
MELBOURNE FL 32935

7. Name and Address of New Registered Agent

Name

SHEA, THOMAS

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

3135 SHADY DELL LANE #109

City

MELBOURNE

FL

Zip Code

32935

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

02-19-02

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	PD	☒ Delete
NAME	BARBOUR, EDWARD	
STREET ADDRESS	3135 SHADY DELL LANE #114	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	VD	☐ Delete
NAME	D'ANGELO, ALBERT	
STREET ADDRESS	3135 SHADY DELL LANE #203	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	SD	☒ Delete
NAME	MCCURDY, STACEY C	
STREET ADDRESS	3135 SHADY DELL LANE #212	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	D	☒ Delete
NAME	D'ANGELO, ALBERT	
STREET ADDRESS	3135 SHADY DELL LN #203	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	TD	☒ Delete
NAME	YOST, ALICE D	
STREET ADDRESS	3135 SHADY DELL LANE 120	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	D	☒ Delete
NAME	SHEA, THOMAS	
STREET ADDRESS	3135 SHADY DELL LANE #109	
CITY-ST-ZIP	MELBOURNE FL	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☐ Change ☐ Addition
NAME	SHEA, THOMAS	
STREET ADDRESS	3135 SHADY DELL LANE #109	
CITY-ST-ZIP	MELBOURNE, FL 32935	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	☐ Change ☐ Addition
NAME	YOST, ALICE D	
STREET ADDRESS	3135 SHADY DELL LANE #120	
CITY-ST-ZIP	MELBOURNE, FL 32935	
TITLE	TD	☐ Change ☐ Addition
NAME	CHARLES LAMMERS	
STREET ADDRESS	3135 SHADY DELL LANE # 116	
CITY-ST-ZIP	MELBOURNE, FL 32935	
TITLE	D	☐ Change ☐ Addition
NAME	BARBOUR, EDWARD	
STREET ADDRESS	3135 SHADY DELL LANE #114	
CITY-ST-ZIP	MELBOURNE, FL 32935	
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:

THOMAS SHEA

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-19-02

Date

259-0842

Daytime Phone #

CR2E037 (9/01)