

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 732588

1. Entity Name

ENVOY POINT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

SUN BLVD.
SUITE 200
PETERSBURG FL 33715
US

5901 SUN BLVD.
SUITE 200
ST PETERSBURG FL 33715
US

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

59-1724179

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

RESOURCE PROPERTY MANAGEMENT
5901 SUN BLVD.
SUITE 200
ST. PETERSBURG FL 33715

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME GRANT, BARRY
STREET ADDRESS 55 KINGSBRIDGE CIRCLE
CITY-ST-ZIP MISSISSAUGA, ONTARIO CANADA L5R -1Y1 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD
NAME NESPER, JIM
STREET ADDRESS 88 HALSON PARKWAY E.
CITY-ST-ZIP AMHERST NY 14051 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE TD
NAME GRANT, JAN
STREET ADDRESS 7100 SUNSET WAY
CITY-ST-ZIP ST PETERSBURG FL 33755 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE SD
NAME SCRIVENER, MARSHA
STREET ADDRESS 7100 SUNSET WAY #203 WEST
CITY-ST-ZIP SAINT PETERSBURG BEACH FL 33706 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME BINDER, KATHY
STREET ADDRESS 7150 SUNSET WAY #504
CITY-ST-ZIP SAINT PETERSBURG BEACH FL 33706 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME VON KAFNEL, CURTIS
STREET ADDRESS 7150 SUNSET WAY #303
CITY-ST-ZIP SAINT PETERSBURG BEACH FL 33706 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

SIGNATURE REQUIRED GRANT, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/15/02

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

05-14-2002 90337 036 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)