

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 738099

1. Entity Name

CASA DEL MAR #1 CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 03, 2000 8:00 am
Secretary of State

04-03-2000 90208 018 ****61.25

Principal Place of Business Mailing Address
10033 9TH STREET NORTH, 2ND FLOOR 10033 9TH STREET NORTH, 2ND FLOOR
ST PETERSBURG FL 33716 ST PETERSBURG FL 33716-3804

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1759785

Applied For

Not Applicable

Zip

Country

Zip

Country

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

RAMPART PROPERTIES, INC.
10033 9TH STREET NORTH, 2ND FLOOR
ST PETERSBURG FL 33716

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 D ☒ Delete
NAME COLSON, LEN
STREET ADDRESS 10033 9TH ST N 2ND FL
CITY-ST-ZIP ST PETERSBURG FL 33716

TITLE P ☐ Change ☒ Addition
NAME Mr. Joseph Malpigli
STREET ADDRESS 10033 9th Street North
CITY-ST-ZIP St. Petersburg, Florida 33716

TITLE D ☐ Delete
NAME COUVE, CARL
STREET ADDRESS 10033 9TH ST N 2ND FL
CITY-ST-ZIP ST PETERSBURG FL 33716

TITLE T ☐ Change ☒ Addition
NAME Mr. James Regan
STREET ADDRESS 10033 9th Street North
CITY-ST-ZIP St. Petersburg, Florida 33716

TITLE VP ☐ Delete
NAME KNEE, RONALD
STREET ADDRESS 10033 9TH ST N 2ND FL
CITY-ST-ZIP ST PETERSBURG FL 33716

TITLE S ☐ Change ☒ Addition
NAME Mr. Dan Zurawski
STREET ADDRESS 10033 9th Street North
CITY-ST-ZIP St. Petersburg, Florida 33716

TITLE D ☐ Delete
NAME SCHONEY, JIM
STREET ADDRESS 10033 9TH ST N 2ND FL
CITY-ST-ZIP ST PETERSBURG FL 33716

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

TITLE P ☒ Delete
NAME LORENZ, RICHARD
STREET ADDRESS 10033 9TH ST N 2ND FL
CITY-ST-ZIP ST PETERSBURG FL 33716

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

TITLE D ☐ Delete
NAME BERESFORD, JIM
STREET ADDRESS 10033 9TH ST N 2ND FL
CITY-ST-ZIP ST. PETERSBURG FL 33716

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:

Joseph Malpigli
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)