

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 741183

1. Entity Name

SEA PALMS CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Jan 19, 2000 8:00 am**  
**Secretary of State**

01-19-2000 90251 020 \*\*\*\*61.25

00005281



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

3200 N. A1A  
FT. PIERCE FL 34949

3200 N. A1A  
FT. PIERCE FL 34949-6872

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

59-1870269

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

GEORGE HOFFER  
3200 N A1A #607  
FT. PIERCE FL 34949

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 WILLIAM, MOORE  
STREET ADDRESS 3200 N A1A #102  
CITY-ST-ZIP FT. PIERCE FL 34949

TITLE VP ☐ Change ☒ Addition  
NAME Frank Sawory  
STREET ADDRESS 3200 N. A1A #210  
CITY-ST-ZIP Ft. Pierce, FL 34949

TITLE T ☒ Delete  
NAME CAROL CLEMENTS  
STREET ADDRESS 3200 N A1A #1205  
CITY-ST-ZIP FT. PIERCE FL 34949

TITLE T ☐ Change ☒ Addition  
NAME Clifford Kearn  
STREET ADDRESS 3200 N. A1A #309  
CITY-ST-ZIP Ft. Pierce, FL 34949

TITLE S ☒ Delete  
NAME NINA PETERSON  
STREET ADDRESS 3200 N A1A #106  
CITY-ST-ZIP FT. PIERCE FL 34949

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

TITLE VP ☐ Delete  
NAME SINCERBEAUX, JOHN  
STREET ADDRESS 3200 N A1A #209  
CITY-ST-ZIP FT. PIERCE FL 34949

TITLE D ☒ Change ☐ Addition  
NAME John Sincerbeaux  
STREET ADDRESS 3200 N A1A #209  
CITY-ST-ZIP Ft. Pierce, FL 34949

TITLE D ☐ Delete  
NAME DORAN, JOHN  
STREET ADDRESS 3200 N A1A #903  
CITY-ST-ZIP FT. PIERCE FL

TITLE S ☒ Change ☐ Addition  
NAME John Doran  
STREET ADDRESS 3200 N. A1A #903  
CITY-ST-ZIP Ft. Pierce, FL 34949

TITLE P ☐ Delete  
NAME HOFFER, GEORGE  
STREET ADDRESS 3200 N A1A #607  
CITY-ST-ZIP FT. PIERCE FL 34949

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:

**SIGNATURE REQUIRED**

1/4/2000

561 461 3100

CR2E037 (9/99)