2000 UNIFORM BUSINESS REPORT (UBR) OCUMENT # **741865** Entity Name REGENCY CABANAS TOWNHOUSE ASSOCIATION, INC. rincipal Place of Business Mailing Address 1500 VIA DELUNA, E-12 --- via deluna. e-12 ---- BEACH FL 32561 APT. E-12 PENSACOLA BEACH FL 32561 Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State 4. FEI Number 59-1906877 Country Zip Country Zip 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) GRUBE, JOHN W 1500 VIA DELUNA City PENSACOLA BEACH FL 32561 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) 9. Election Campaign Financing FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. VPD ☐ Delete TITLE TITLE PRESIDENT NAME PACE. LINDWOOD NAME PACE, LINDWOOD STREET ADDRESS STREET ADDRESS 511 MARIE ANTOINETTE 511 MARIE ANTOINETTE CITY-ST-ZIP CITY-ST-ZIP LAFAYETTE LA 47 <u>LAFAYETTE LA</u> Delete TITLE TITLE VICE-PRESIDENT NAME MILLER, DOUG STEPHENS, SANFORD STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

SIGNATURE:

CITY-ST-ZIP

CITY-ST-ZIF

TITLE

NAME

TITLE

NAME

12328 N OAK HILL PARKWAY

BATON ROUGE LA

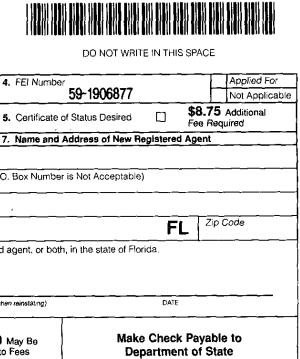
grube, John W

1500 VIA DELUNA D2

PENSACOLA BCH FL

FILED Mar 13, 2000 8:00 am Secretary of State

03-13-2000 90067 003 ****61.25



1500 VIA DELUNA #E-6 PENSACOLA BEACH, FL 32561

1500 VIA DELUNA #E-10

PENSACOLA BEACH. FL

DIRECTOR

MARK, BURKE

√ Change

Change

☐ Change

Change

☐ Addition

X Addition

X Addition

Addition

Larry Cannon STREET ADDRESS STREET ADDRESS 1500 VIA DELUNA A-1 CITY-ST-ZIP CITY-ST-ZIP PENSACOLA BCH FL TITLE ☐ Change Addition Delete NAME NAME PEARCEY, LYNNE STREET ADDRESS STREET ADDRESS 2105 WARWICKSHIRE DR CITY-ST-ZIP CITY-ST-7IP GREENSBORO NC 27455 ☐ Change ☐ Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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.

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Delete

Delete