## **2001 UNIFORM BUSINESS REPORT (UBR)**

## Apr 05, 2001 8:00 am <sup>§</sup> Secretary of State **DOCUMENT # 742043** 1. Entity Name PLANTATION-BY-THE-SEA CONDOMINIUM ASSOCIATION, I 04-05-2001 90438 044 \*\*\*\*61.25 Mailing Address Principal Place of Business 87465 OLD HIGHWAY 87465 OLD HIGHWAY ISLAMORADA FL 33036 ISLAMORADA FL 33036 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For 4. FEI Number City & State City & State 59-1886607 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) NEWMEYER, JIM 12960 N CALUSA CLUB DRIVE **MIAMI FL 33186** 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 SI DENT 9. Election Campaign Financing Make Check Payable to **FILE NOW: \$5.00** May Be $\Box$ Trust Fund Contribution. Added to Fees Department of State **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. RICHARD HEAR FIELD Delete TITLE TITLE 87465 OLD HWY# 242 CHIARELLO, BRUCE NAME NAME IS/AMORADA, Fl. 33036 STREET ADDRESS STREET ADDRESS **3 CHARLES WAY** C!TY-ST-ZIP CITY-ST-ZIP LAWRENCEVILLE N 08648 LENDA POPPELL 87465 OW HWY #221 Addition ☐ Change **Delete** TITLE D TITLE JOHANSEN, JOE NAME NAME STREET ADDRESS STREET ADDRESS 87465 OLD HIGHWAY #103 IS/AMORADA, F1. 33036 CITY-ST-ZIP. CITY\_ST-ZIP-ISLAMORADA-FL: 33036 --- -DAN ThOMPSON ☐ Change Addition Delete TITLE TITLE NAME 87465 OW HWY. #214 SCHULTZ, S NAME STREET ADDRESS STREET ADDRESS 87465 OLD HIGHWAY #239 IS LA MORAD A, Fl. 33036 CITY-ST-ZIP CITY-ST-ZIP ISLAMORADA FL IUSEPH FERRINO **⊠** Delete TITLE D **Addition** TITLE VIANI, JOE NAME 90 ST NAME 164-19 STREET ADORESS 6371 PINEHURST CIRCLE WEST STREET ADDRESS Howard Bch, F1 \$\$414 CITY-ST-ZIP CITY-ST-ZIP TAMARAC FL CLAIBOURN ☐ Change TITLE D Addition ☐ Delete TITLE 20717 W. 888 RD NAME NEWMEYER, JAMES NAME STREET ADDRESS STREET ADDRESS 12960 N CALVSA CLUB DR oK. Cook son CITY-ST-ZIP CITY-ST-782 MIAMI FL 33186 TITLE 7 ☐ Addition TITLE Delete

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.

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: SIGNATURE and TYPED OR PRINTED NAME OF SIGNING OFFICER OR MIRECTOR

AUCHMUTY, R

87465 OLD HWY 116

ISLAMORBOA FL 33036

NAME

STREET ADDRESS

CITY-ST-ZIP

4/2/01

3-5-852-5047

Daytime Phone #