## 2001 UNIFORM BUSINESS REPORT (UBR)

## FILED Apr 17, 2001 8:00 am Secretary of State DOCUMENT # 743622 1. Entity Name ISLAMORADA CONDOMINIUM ASSOCIATION, INC. 04-17-2001 90157 031 \*\*\*\*61.25 Principal Place of Business Mailing Address 700 WAVECREST AVENUE . \* 700 WAVECREST AVENUE P.O. BOX 3603 P.O. BOX 3603 INDIALANTIC FL 32903-0603 INDIALANTIC FL 32903-0603 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE 4. FEI Number City & State Applied For 59-2672723 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name ropenty -Street Addr SPACE COAST PROPERTY MGMT. 3128 LAKE WASHINGTON RD., #170 **MELBOURNE FL 32934** City GIDOUPNE 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 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. Addition SD TITLE TITLE Change Delete Bob Edmonds 700 wavedrost Aver # 802 GONZALEZ, ADELA NAME NAME STREET ADDRESS STREET ADDRESS 700 WAVECREST #201 CITY-ST-ZIP CITY-ST-ZIP INDIALANTIC FL 32903 T. Dialertic . Fl 32903 TD ☐ Addition ☐ Delete TITLE TITLE DICKSON, ED NAME NAME STREET ADDRESS STREET ADDRESS 700 WAVECREST AVE., #203 CITY-ST-ZIP CITY-ST-ZIP INDIALANTIC FL 32903 TITLE Delete TITLE ☐ Change Addition GONZALEZ, ADELA NAME NAME Caroline Karlsson STREET ADDRESS STREET ADDRESS 700 WAVECREST #201 AVC, # 10) CITY-ST-ZIP CITY-ST-ZIP INDIALANTIC FL 32903 903 ☐ Delete ☐ Addition TITLE TITLE BADHDASSANAN, JACK NAME NAME STREET ADDRESS 700 WAVECREST AVE., #305 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP INDIALANTIC FL 32903 TITLE Delete TITLE ☐ Change ☐ Addition TUOLLEY, TOM NAME NAME STREET ADDRESS 700 WAVECREST AVE., #305 STREET ADDRESS CITY-ST-ZIP INDIALANTIC FL 32903 CITY-ST-ZIP Addition TITLE Delete TITLE ☐ Change GONZALEZ, ADELA NAME NAME

CITY-ST-ZIP INDIALANTIC FL 32903

12. I hereby certify that the information supplied with this filling 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 of the corporation or the rece changed, or on an attachme

STREET ADDRESS

SIGNATURE:

700 WAVECREST AVE., #201

STREET ADDRESS

CITY-ST-ZIP

Paril 11, 2001 (321) 984

CR2E037 (10/00)