

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
May 17, 2000 8:00 am
Secretary of State

05-17-2000 90878 049 ****61.25

DOCUMENT # 744278

1. Entity Name
325 FERNWOOD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business C/O RICHARD VERNON 325 FERNWOOD ROAD KEY BISCAIYNE FL 33149	Mailing Address C/O RICHARD VERNON 325 FERNWOOD ROAD KEY BISCAIYNE FL 33149-1332
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business Suite, Apt. #, etc. City & State Zip	3. Mailing Address Suite, Apt. #, etc. City & State Zip	Country	Country
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4. FEI Number 59-1938787	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
VERNON, RICHARD
325 FERNWOOD ROAD
KEY BISCAIYNE FL 33149

7. Name and Address of New Registered Agent
 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**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

T STONE, EDWARD H. 145 HAMPTON LANE KEY BISCAIYNE FL	<input type="checkbox"/> Delete
VP DAUBIN, SHIRLEY 325 FERNWOOD RD APT #4 KEY BISCAIYNE FL 33149	<input type="checkbox"/> Delete
PD VERNON, RICHARD 609 OCEAN DR APT 10H KEY BISCAIYNE FL	<input type="checkbox"/> Delete
SD SCANELL, MARY 220 WOOD CREST RD KEY BISCAIYNE FL	<input type="checkbox"/> Delete
D VERNON, HARRY 100 ISLAND DR KEY BISCAIYNE FL	<input checked="" type="checkbox"/> Delete
	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P BARBARA MACKLIN 561 WARREN LANE KEY BISCAIYNE, FL. 33149	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Mary Scanell* Secretary *April 25, 2000*
Signature, typed or printed name of signing officer or director Date Daytime Phone #
 305 361 5654