

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 746427

1. Entity Name

THE FOUR SEASONS CONDOMINIUM ASSOCIATION OF COCOA BEACH, INC.

Principal Place of Business

Mailing Address

FOUR SEASONS CONDOMINIUM ASSOCIATION, INC.
3799 S. BANANA RIVER BLVD.
COCOA BEACH FL 32931
US

FOUR SEASONS CONDOMINIUM ASSOCIATION, INC.
3799 S. BANANA RIVER BLVD.
COCOA BEACH FL 32931
US

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 59-1978855

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

SOILEAU, JOHN (ATTY)
1970 MICHIGAN AVE, BLDG C
P O BOX 236007
COCOA FL 32923

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
NAME CLERICUZIO, MARJORIE
STREET ADDRESS 3799 S BANANA RIVER BLVD, #1023
CITY-ST-ZIP COCOA BEACH FL 32931 ☒ Delete

TITLE D
NAME DORENE DENT
STREET ADDRESS 3799 S. BANANA RIVER BLVD #806
CITY-ST-ZIP COCOA BEACH, FL. 32931 ☐ Change ☒ Addition

TITLE D
NAME DENT, JAMES
STREET ADDRESS 3799 S. BANANA RIVER BLVD, #817
CITY-ST-ZIP COCOA BEACH FL 32931 ☒ Delete

TITLE D
NAME DON LAPORTA
STREET ADDRESS 3799 S. BANANA RIVER BLVD #1017
CITY-ST-ZIP COCOA BEACH, FL 32931 ☐ Change ☒ Addition

TITLE D
NAME DOANE, ROBERT
STREET ADDRESS 3799 S. BANANA RIVER BLVD, #502
CITY-ST-ZIP COCOA BEACH FL 32931 ☒ Delete

TITLE D
NAME RON KNUAPPEN
STREET ADDRESS 3799 S. BANANA RIVER BLVD #1014
CITY-ST-ZIP COCOA BEACH, FL 32931 ☐ Change ☒ Addition

TITLE D
NAME HENNIGAN, CLAUDIA
STREET ADDRESS 3799 S BANANA RIVER BLVD, #808
CITY-ST-ZIP COCOA BEACH FL 32931 ☐ Delete

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

TITLE D
NAME SPECHA, LORRAINE
STREET ADDRESS 3799 S BANANA RIVER BLVD, #804
CITY-ST-ZIP COCOA BEACH FL 32931 ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January 16, 2001

783-7008

Daytime Phone #

CR2E037 (9/01)