## 2000 UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # 748846**

1. Entity Name

## CORDOVA GREENS V CONDOMINIUM ASSOCIATION, INC

FILED Feb 16, 2000 8:00 am Secretary of State

02-16-2000 90020 049 \*\*\*\*61.25

CONDUVA GREENS V CONDOMINION ASSOCIATION, INC.					02-16-2000 90020 049 *****61.25			
Principal Place of Business		Mailing Address						
2189 CLEVELAND ST., #225		2189 CLEVELAN						
	VATER, FL 33765	CLEARWATER,	Ì					
US US	VATER, IL 33703	US US	.,	_				
2. Principal P	daca of Rusiness	3. Mailing Address						
	ļ	1		1 1000	) 19811 91001 10181 10111 91010 0	HER BEST STREET STREET STREET	<b></b>	
	SEABOARD ARBORS AGEMENT SVC, INC	S CLO SEABOARD ARBORS MANAGEMENT SVC, INC			DO NOT WRITE IN THIS SPACE			
2189 CLEVELAND STREET SUITE 225		2189 CLEVELAND STREET		r!	4. FEI Number Applied Fo			
	ARWATER, FL 33765	C, SUITE 225	, FL 33765	4. FEINUM	59-1976038	<del>!</del>	Not Admili	
—- j US	<u></u>	Zi US				□ \$8.75 A	dditional	
					ite of Status Desired	Fee Requi	ired	
	6. Name and Address of Current F	Registered Agent		7. Name a	nd Address of New Re	gistered Agent	<del></del>	
			\ \\ \'\ \ .	EIGHTÓN, LE	'N			
LEICHTON	I JENNADO A		S   C	No SEABOARD	ARBORS ble)			
	i, lennard a. Ioard Arbors Management se	:DVICES	; M	IANAGEMENT S 189 CLEVELA	NC,INC AND STREET —		<del></del>	
	CLEVELAND ST., #225	, (TOLO,	l i s	UITE 225				
	RWATER FL 33765	1		LEARWATER,	FL 33705	FL Zip Co	ode	
<del></del> ,	named entity submits this statement for	the ournose of changing its r			ooth in the state of Florid	da.		
o. The above	Hattien entity and the fine agreement of	the purpose of changing its i	egistered office of te	ogiotorou agont, or i	John, at the state of them	<b></b> .		
SIGNATURE .				<del> </del>		200		
	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE:	Registered Agent signature	required when reinstating)		DATE		
						OL -3-B -3-1-		
FILE NOW:				\$5.00 May Be Added to Fees				
	FEE IS \$61.25	indot i drid donario		Added to 1 ees	Deb	artinent of State	5	
10.	OFFICERS AND DIR	ECTORS	11.	ADDITIONS/	CHANGES TO OFFICERS	S AND DIRECTORS	IN 10	
TITLE	D	☐ Delete	TITLE			☐ Change	e 🗀 .	
NAME	Banas, Edward	·	NAMÉ					
STREET ADDRESS	8703 BARDMOOR BLVD #205		STREET ADDRESS					
CITY-ST-ZIP	LARGO FL		CITY-ST-ZIP			Change		
TITLE	VPD	. Delete	TITLE NAME	•		☐ Change	в <u>Г</u>	
NAME STREET ADDRESS	SLATER, PEGGY		STREET ADDRESS					
CITY-ST-ZIP	8799 BARDMOOR BLVD G102 LARGO FL	To the server of the	CITY-ST-ZIP	والمحتبية أأريان بالمحاد ليبيعاده		and the second section is		
TITLE	PD PD	Delete	TITLE	<del></del>		☐ Change	e 🗆 .	
NAME	WEBB, GLENDEL	Delete	NAME					
STREET ADDRESS	8765 BARDMOOR BLVD #203		STREET ADDRESS	•				
CITY-ST-ZIP	LARGO FL		CITY-ST-ZIP					
TITLE	TD	☐ Delete	TITLE	<u></u>		☐ Change	e 🗀 *.	
NAME	HUBER, JOHN	,	NAME					
STREET ADDRESS	8799 BARDMOOR BLVD., #305		STREET ADDRESS					
CITY-ST-ZIP	LARGO FL		CITY-ST-ZIP					
TITLE	SD	Delete	TITLE			☐ Change	e 🗀 .	
NAME	PARIS, FAY		NAME STREET ADDRESS			•		
STREET ADDRESS CITY-ST-ZIP	8703 BARDMOOR BLVD., #102		CITY-ST-ZIP					
	LARGO FL	□ Delete	TITLE	·		☐ Change	— e □ '.	
TITLE NAME	D   Marshall, Warren T	□ Delete	NAME	•		∟ ouango	- 🗀 🔻	
STREET ADDRESS	8799 BARDMOOR BLVD G101		STREET ADDRESS					
CITY-ST-ZIP	LARGO FL		CITY-ST-ZIP					
	LANGUIL.				(2)(i) Florida Statutes II			

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 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 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 in changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone