

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 29, 2002 8:00 am
Secretary of State

04-29-2002 90142 039 ****61.25

DOCUMENT # 749713

1. Entity Name

TARPON BEACH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

2475 W GULF
SANIBEL FL 33957

Mailing Address

ISLAND MANAGEMENT
PO BOX 1000
SANIBEL FL 33957

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

59-1971398

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

JAMBECK, NICK
703-B TARPON BAY ROAD
SANIBEL FL 33957

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

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 NAME STREET ADDRESS CITY-ST-ZIP	D GRAFF, JERRY 708 STONEGATE PASS COLGATE WI 53017	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD STEIN, IRWIN 2475 W. GULF DRIVE #307 SANIBEL FL 33957	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERTS, LEE 27130 KENNEDY DRIVE DEARBORN MI	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PO	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VO Brown, Marlene 2475 W. Gulf #111 Sanibel FL 33957	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TO Luker, Ron 155 Ethel Ct Walled Lake MI 48390	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SO Seibold, Marvin 6133 Blue Circle Dr Minnetonka MN 55343	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Roberts, Joe 2475 W. Gulf #206 Sanibel FL 33957	☐ Change ☒ Addition
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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)