

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 22, 2000 8:00 am
Secretary of State

03-22-2000 90047 015 ****61.25

DOCUMENT # 749733

1. Entity Name

BAY TOWNE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O RAMPART PROPERTIES, INC.
 10033 9TH STREET NORTH
 ST. PETERSBURG FL 33716

C/O RAMPART PROPERTIES, INC.
 10033 9TH STREET NORTH
 ST. PETERSBURG FL 33716-3804

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1982782

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

MEZER, STEVEN PA
1212 COURT STREET
SUITE B
CLEARWATER FL 34616

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	Delete
D	KIRBY, FRANKLIN	10033 9TH STREET N	ST. PETERSBURG FL 33716	<input type="checkbox"/>
V	CONROY, JOSEPH M	10033 9TH STREET N	ST. PETERSBURG FL 33716	<input type="checkbox"/>
P	LORINCZ, ED	10033 9TH ST N 2ND FL	ST. PETERSBURG FL 33716	<input type="checkbox"/>
DS	SPANGLER, SANDIE	10033 9TH ST N 2ND FL	ST. PETERSBURG FL 33716	<input type="checkbox"/>
TD	WADSWORTH, ELIZABETH	10033 9TH ST N 2ND FL	ST. PETERSBURG FL 33716	<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	KEN STEHNEY			<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
D	RICHARD COX			<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
	SUE SUNBERG			<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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: Kenneth Stehney, RECR. PRESIDENT
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/00
 Date

727-726-3557
 Daytime Phone #

CR2E037 (9/99)