## 20(1 UNIFORM BUSINESS REPORT (UBR)

## Apr 16, 2001 8:00 am Secretary of State DOCUMENT # 751526 1. Entity Name TARPON COVE CONDOMINIUM ASSOCIATION, INC. 04-16-2001 90256 034 \*\*\*\*61.25 Principal Place of Business Mailing Address 1531 W. KLOSTERMAN RD. 1531 W. KLOSTERMAN RD. TARPON SPRINGS FL 34689 TARPON SPRINGS FL 34689 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State Applied For FEI Number 59-2147971 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 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) D'AMOURS, JEFFREY R 1531 W. KLOSTERMAN RD. TARPON SPRINGS FL 34689 City 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: 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. FEE IS \$61.25 Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE Change Addition SHAVER DAN NAME WILLIAMS, DOUG NAME 1810 MARINER DRIVE, #407 1801 MARINER DR SUITE 19 STREET ADDRESS STREET ADDRESS CITY-ST-ZIE TARPON SPRINGS FL 34689 CITY-ST-ZIP TARPON SPRINGS, FL 34689 DT TITLE TITLE Delete Change : ■ Addition GERAGHTY, JOHN 1800 MARINGR DR 45 VENEZIA, FRANK NAME NAME STREET ADDRESS 1805 MARINER DR SUITE 55 STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS FL 34689 CITY-ST-ZIP TARPON SPRINGS, -FL 34689-SD TITLE TITLE Change Addition 🔀 Delete SCHWALJE, JOSEPH 1810 MARINER DRIVE #104 HUGHES, MIRIAM NAME NAME STREET ADDRESS 1810 MARINER DR SUITE 307 STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TARPON SPRINGS, FL 34689 **TARPON SPRINGS FL 34689** DP TITLE JANET R. CARROLL -CAST NAME -Addition ☐ Delete TITLE NAME SHAVER, DAN NAME 1804 MARINER OR #35 STREET ADDRESS STREET ADDRESS 1810 MARINER DR SUITE 407 CITY-ST-ZIP CITY-ST-ZIP TARPON SPRINGS FL 34689 TARPON SPRINGS, FL 34689 TITLE Addition TITLE BELWARD, RICHARD 1814 MARINER PRIVE \$158 NAME MECONNAHEY, BARBARA J NAME STREET ADDRESS STREET ADDRESS 1814 MARINER DRIVE #168 TARPON SPRINGS, FL 34689 CITY-ST-ZIP CITY-ST-ZIP TARPON SPRINGS FL 34689 £ 5 ☐ Delete TITLE Change ☐ Addition ARBOUR, ROBERT NAME ARBOUR, ROBERT NAME 1811 MARINER DRIVE, #128 STREET ADDRESS STREET ADDRESS 1811 MARINE DRIVE, #128 CITY-ST-ZIP CITY-ST-7IP TARPON SPRGS FL 34689 TAKPON SPRINGS, FL 34689 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 eath; that I am an officer or director

ther like empowered Tivet R. Carrol 4/9/01 (727) 934-1172

Placetor Dayline Phone # SIGNATURE:

changed, or on an attachr

ent with an addres

of the corporation of 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