

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 10, 2003 8:00 am
Secretary of State

04-10-2003 90065 001 ***61.25

DOCUMENT # 751526

1. Entity Name
TARPON COVE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**1531 W. KLOSTERMAN RD.
TARPON SPRINGS FL 34689
US**

Mailing Address

**1531 W. KLOSTERMAN RD.
TARPON SPRINGS FL 34689
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 **59-2147971**

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

**D'AMOURS, JEFFREY R
1531 W. KLOSTERMAN RD.
TARPON SPRINGS FL 34689**

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. I am familiar with, and accept the obligations of registered agent.

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
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	V	☒ Delete
NAME	SHAWER, DAN	
STREET ADDRESS	1810 MARINER DRIVE #407	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	
TITLE	T	☐ Delete
NAME	GERAGHTY, JOHN	
STREET ADDRESS	1800 MARINER DR #5	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	
TITLE	D	☒ Delete
NAME	SCHWALJE, JOSEPH	
STREET ADDRESS	1810 MARINER DR #104	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	
TITLE	P	☐ Delete
NAME	CARROLL, JANET R	
STREET ADDRESS	1804 MARINER DR #55	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	
TITLE	D	☒ Delete
NAME	BERNARD, RICHARD	
STREET ADDRESS	1814 MARINER DR #158	
CITY-ST-ZIP	TARPON SPRINGS FL 34689	
TITLE	S	☒ Delete
NAME	ARBOUR, ROBERT	
STREET ADDRESS	1811 MARINE DRIVE #128	
CITY-ST-ZIP	TARPON SPRGS FL 34689	

TITLE	V	☐ Change ☒ Addition
NAME	ROBERT MC INTOSH	
STREET ADDRESS	1815 MARINER DR #169	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE	D	☐ Change ☒ Addition
NAME	DOUGLAS WILLIAMS	
STREET ADDRESS	1801 MARINER DR. #19	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE		☐ Change ☒ Addition
NAME	CATHERINE LAHSHE	
STREET ADDRESS	1806 MARINER DRIVE #215	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	☐ Change ☒ Addition
NAME	BRUCE BUSSELL	
STREET ADDRESS	1801 MARINER DR. #17	
CITY-ST-ZIP	TARPON SPRINGS, FL 34689	
TITLE	S	☐ Change ☒ Addition
NAME	VICKI HOWELL	
STREET ADDRESS	1802 MARINER DR. #31	
CITY-ST-ZIP	TARPON 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 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:

[Handwritten Signature]

CR2E037 (10/02)