

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 25, 2002 8:00 am
Secretary of State

06-25-2002 90438 035 ****61.25

DOCUMENT # 755336

1. Entity Name

BAHIA EAST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1288 MARLER DRIVE
 FT WALTON BCH FL 32548

Mailing Address

13 MEMORIAL PARKWAY
 #102
 FT WALTON BCH FL 32548

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

59-2213804

Applied For

Not Applicable

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

BOLTON, CHARLES H
13 MEMORIAL PARKWAY
SUITE 102
FT WALTON BCH FL 32548

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 **PD** Delete
 NAME **BOLTON, CHARLES H**
 STREET ADDRESS **13 MEMORIAL PARKWAY #102**
 CITY-ST-ZIP **FORT WALTON BEACH FL 32548**

TITLE **Bolton** Change Addition

TITLE **VPD** Delete
 NAME **BOLTON, MAX JR**
 STREET ADDRESS **705 LONGLEAF DR**
 CITY-ST-ZIP **FT. WALTON BEACH FL 32548**

TITLE **Taylor,** Change Addition

TITLE **SD** Delete
 NAME **SLOAN, VIRGINIA**
 STREET ADDRESS **1288 MARLER DR #14**
 CITY-ST-ZIP **FORT WALTON BEACH FL 32548**

TITLE **Bolton, Max** Change Addition

TITLE **TD** Delete
 NAME **TAYLOR, TERRI**
 STREET ADDRESS **1288 MARLER DR #14**
 CITY-ST-ZIP **FT. WALTON BEACH FL 32548**

TITLE **SLOAN** Change Addition

TITLE **D** Delete
 NAME **FAIEBERG, AL**
 STREET ADDRESS **6004 VOGEL CT**
 CITY-ST-ZIP **MOBILE AL 36693**

TITLE **Hopper** Change Addition

TITLE **AS** Delete
 NAME **RAHE, THEODORE O**
 STREET ADDRESS **327 ELDREDGE RD**
 CITY-ST-ZIP **FORT WALTON BEACH FL 32547**

TITLE 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 empowerments.

SIGNATURE:

SIGNATURE REQUIRED

6-19-02 850 243 4233

CR2E037 (9/01)