

2000 UNIFORM BUSINESS REPORT (UBR)

4/2

DOCUMENT # 755435

1. Entity Name

PIRATE'S COVE CLUB CONDOMINIUM ASSOCIATION, INC.

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

04-26-2000 90060 040 ****61.25

Principal Place of Business 6025 SUN BLVD STE 202 ST PETERSBURG FL 33715 US	Mailing Address 6025 SUN BLVD STE 202 ST PETERSBURG FL 33715-1101 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 5901 Sun Blvd Suite, Apt. #, etc. SUITE 200 City & State	3. Mailing Address 5901 Sun Blvd. Suite, Apt. #, etc. SUITE 200. City & State
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Zip	Country	Zip	Country
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4. FEI Number 59-2140319	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

FREDA, ALBERTO
 6025 SUN BLVD STE 202
 ST PETERSBURG FL 33715

7. Name and Address of New Registered Agent

Name: RESOURCE PROPERTY MGT.
 Street Address (P.O. Box Number is Not Acceptable): 5901 SUN BLVD, STE. 200
 City: ST. PETE FL Zip Code: 33715

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: Alberto Freda, ALBERTO FREDA, SR. J.P. DATE: _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS

TITLE NAME	VP CUSICK, MARLENE	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	1375 PINELLAS BAYWAY, #38	
CITY-ST-ZIP	TIERRA VERDE FL 33715	
TITLE NAME	TD JIM ECKLES	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	1355 PINELLAS BAYWAY #5	
CITY-ST-ZIP	TIERRA VERDE FL 33715	
TITLE NAME	PD JANET OLSON	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	1375 PINELLAS BAYWAY	
CITY-ST-ZIP	TIERRA VERDE FL 33715	
TITLE NAME	SD FRED LINK	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	1355 PINELLAS BAYWAY #12	
CITY-ST-ZIP	TIERRA VERDE FL 33715	
TITLE NAME	D HUSICK, CHARLES	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	1375 PINELLAS BAYWAY #29	
CITY-ST-ZIP	TIERRA VERDE FL 33715	
TITLE NAME	D NICK CRAPIS	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	1355 PINELLAS BAYWAY #1	
CITY-ST-ZIP	TIERRA VERDE FL 33715	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	PD RICH GONLIN	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	VP HAL CUSICK	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	TD GARY HOLSTRUM	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	SD JEANNE HOULTON	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	D CHARLES HUSICK	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	D NICK CRAPIS	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

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: ALBERTO FREDA **SIGNATURE REQUIRED** Date: 4/21/00 Daytime Phone # _____

CR2E037 (9/99)