

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 26, 2000 8:00 am
Secretary of State

07-26-2000 90042 002 ****61.25

DOCUMENT # 757136

1. Entity Name

THE SANDPEBBLE BEACH CLUB CONDOMINIUM ASSOCIATIO ✓

Principal Place of Business

4800 SANDPEBBLE TRACE
 STUART FL 34996-8481

Mailing Address

4800 SANDPEBBLE TRACE
 STUART FL 34996-8481

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2200762

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

CORNETT, JANES E
 WACKEEN, CORNETT & GOODE
 401 E. OSCEOLA ST.
 STUART FL 34995

7. Name and Address of New Registered Agent

Name: **ROBERT SUMMERS, ESQ**
 Street Address (P.O. Box Number is Not Acceptable): **2081 E OCEAN BLVD.**
STUART
 City: **STUART** FL Zip Code: **34996**

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]*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

7/13/00
 DATE

FILE NOW: FEE IS \$61.25
After September 13, 2000 min. will be \$236.25

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
P	THATCHER, WILLIAM	4440 SANDPEBBLE TRACE, #102	STUART FL 34996	<input type="checkbox"/>
TD	DUFFY, DOROTHY	4590 SANDPEBBLE TRACE, #206	STUART FL 34996	<input type="checkbox"/>
D	SMITH, EARL	4590 SANDPEBBLE TRACE #305	STUART FL 34996	<input type="checkbox"/>
S	HENSON, HOWARD	2641 NE OCEAN BLVD #401	STUART FL 34996	<input type="checkbox"/>
TD	GREINER, CARLTON	4260 SANDPEBBLE TRACE 303	STUART FL 34996	<input type="checkbox"/>
	TKERS	<i>[Signature]</i>		<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
P	SUSSILLO, JOSEPH	4720 SANDPEBBLE TRACE #306	STUART, FL 34996	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T	MARJORY PERLMUTTER	2571 NE OCEAN BLVD. #406	STUART, FL 34996	<input checked="" type="checkbox"/>	<input type="checkbox"/>
V	RICHARD LEVENSTEIN	4490 SANDPEBBLE TRACE #105	STUART, FL 34996	<input checked="" type="checkbox"/>	<input type="checkbox"/>
S	BRUCE PARNELL	4720 SANDPEBBLE TRACE #104	STUART, FL 34996	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	GARY VAN ZANTEN	2571 NE OCEAN BLVD #102	STUART, FL 34996	<input checked="" 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: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/00)