## 2002 UNIFORM BUSINESS REPORT (UBR)

## Feb 07, 2002 8:00 am Secretary of State **DOCUMENT # 757626** 1. Entity Name MARINER VILLAGE-TARPON COVE COMMUNITY ASSOCIATIO 02-07-2002 90183 032 \*\*\*\*61 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 4. FEI Number Applied For 59-2171067 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent 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. MARKED OF STATE Control of the Control of Control SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Delete TITLE ☐ Change ☐ Addition DILLARD, DONALD NAME NAME STREET ADDRESS 14 MARINER DR. STREET ADDRESS CITY-ST-ZIP TARPON SPRINGS FL 34689 CITY-ST-ZIP DVP TITLE ☐ Delete TITLE Change ☐ Addition NAME SHAVER, DAN NAME STREET ADDRESS 1810 MARINER DR., #407 STREET ADDRESS CITY-ST-7IP TARPON SPRINGS FL 34689 CITY-ST-7IP TITLE Delete TITLE ☐ Change ☐ Addition GERAGHTY, JOHN NAME NAME STREET ADDRESS 1800 MARINER DR # 5 STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP **TARPON SPRINGS FL 34689** DT TITLE ☐ Delete TITLE Change ☐ Addition WILLIAMSON, IAN NAME NAME STREET ADDRESS 434 Mariner dr STREET ADDRESS CITY-ST-7IF TARPON SPRINGS FL 34689 CITY-ST-7IP DS TITLE ☐ Delete ☐ Change Addition CARROLL, JAN NAME STREET ADDRESS 1804 MARINER DR # 35 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Tarpon Springs FL 34689 ☐ Delete TITLE ☐ Change ☐ Addition SAMUELS, ART NAME STREET ADDRESS 204 MARINER DR STREET ADDRESS CITY-ST-ZIP 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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

changed, or on an attachment with an address, with all other like empowered

1-91-09

727. 934-1172

Daytime Phone #

FILED