2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 758139

1. Entity Name

EASTWOOD SHORES CONDOMINIUM NO. 5 ASSOCIATION, I

FILED
Sep 12, 2000 8:00 am
Secretary of State
09-12-2000 90148 029 ****61.25

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
CONDOMINUIM ASSOCIATES 3001 EXECUTIVE DR SUITE 260 CLEARWATER FL 33762 US	CONDOMINUIM ASSOCIATES 3001 EXECUTIVE DR SUITE 260 CLEARWATER FL 33762 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 59-2147739 ☐ 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
MEZER, STEVEN H PA 1212 COURT ST STE B CLEARWATER FL 34616	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 _____ 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
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD LURZ, BRUCE 209 BOUGH AVE CLEARWATER FL 33760	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Billings, T.J. 605 Bough Avenue Clearwater, FL 33760	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JESKEY, JOE 701 BOUGH AVE CLEAR WATER FL 33760	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Lemke, Carol 403 Bough Avenue Clearwater, FL 33760	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NUDELMAN, MARV 409 BOUGH AVE CLEARWATER FL 33760	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Cohen, Carrie 505 Bough Avenue Clearwater, FL 33760	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CRANE, SANDY 602 BOUGH AVENUE CLEARWATER FL 33760	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Martin, Sandra 602 Bough Avenue Clearwater, FL 33760	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (5/00)

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: Steven Nudelman Pres. 9/7/00 7275305001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #