

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 06, 2003 8:00 am
Secretary of State

02-24-2003 90228 004 ***61.25

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1. Entity Name

SEA CLUB OF INDIAN SHORES CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
19725 GULF BLVD.
INDIAN SHORES FL 33785
US

Mailing Address
C/O PAREKH, COMMONS & CO C.P.A.
2700 EAST BAY DR. #107
LARGO FL 33771
US

2. Principal Place of Business

3. Mailing Address
300 S. Duncan Ave

Suite, Apt. #, etc.

Suite, Apt. #, etc.
Suite 220B

City & State

City & State
Clearwater FL

Zip

Country

Zip
33755

Country
USA

4. FEI Number 59-2068757

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

DAVIS, JOHN R
19725 GULF BLVD. #49
INDIAN SHORES FL 33785

7. Name and Address of New Registered Agent

Name David Vetesey
Street Address (P.O. Box Number is Not Acceptable)
19725 Gulf Blvd #29
City Indian Shores FL Zip Code 33785

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

David M. Vetesey

2/22/03

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
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROCKMAN, BARBARA A 19725 GULF BLVD. #403 INDIAN SHORES FL 33785	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GREENE, HOWARD O JR 9105 VOLUNTEER DRIVE ALEXANDRIA VA 23309-2922	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TS DAVIS, JOHN R 19725 GULF BLVD. #49 INDIAN SHORES FL 33785	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	B VETESY, DAVID 19725 GULF BLVD. #29 INDIAN SHORES FL 33785	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILSON, JOHN 19725 GULF BLVD #2 INDIAN SHORES FL 33785	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec/Treasurer TS David Vetesey 19725 Gulf Blvd #29 Indian Shores, FL 33785	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President P Howard O. Greene Jr 9105 Volunteer Drive Alexandria VA 23309	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President VP William Schurr 32 The Cedars St. Catharines, Ontario Canada L2M6M8	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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 empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/22/03

(727) 517-9441

CR2E037 (10/02)