

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 758993

1. Entity Name

SILVER SANDS BEACH AND RACQUET CLUB CONDOMINIUM

FILED
Mar 24, 2000 8:00 am
Secretary of State

03-24-2000 90098 008 ****61.25

Principal Place of Business 6500 SUNSET WAY ST PETERSBURG BEACH FL 33706 US	Mailing Address 6595 SUNSET WAY ST PETERSBURG BEACH FL 33706-2179 US
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DO NOT WRITE IN THIS SPACE

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 59-2095817	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

ZACUR, RICHARD
 5200 CENTRAL AVE.
 ST. PETERSBURG FL 33710

7. Name and Address of New Registered Agent

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 _____
 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
 Department of State**

10. OFFICERS AND DIRECTORS	
TITLE NAME WOLF, JULIUS	Delete <input type="checkbox"/>
STREET ADDRESS 6595 SUNSET WAY	
CITY-ST-ZIP ST PETERSBURG BCH. FL	
TITLE NAME ROSS, JAMES	Delete <input type="checkbox"/>
STREET ADDRESS 6595 SUNSET WAY	
CITY-ST-ZIP ST PETERSBURG BEACH FL 33706	
TITLE NAME NUSSER, GEORGETTE	Delete <input checked="" type="checkbox"/>
STREET ADDRESS 6595 SUNSET WAY	
CITY-ST-ZIP ST PETE BEACH FL	
TITLE NAME FALLER, ROBERT	Delete <input type="checkbox"/>
STREET ADDRESS 6595 SUNSET WAY	
CITY-ST-ZIP ST PETE BEACH FL	
TITLE NAME SINNETT, JIM	Delete <input checked="" type="checkbox"/>
STREET ADDRESS 6595 SUNSET WAY	
CITY-ST-ZIP ST PETE BEACH FL	
TITLE NAME WIGHT, ROY	Delete <input type="checkbox"/>
STREET ADDRESS 6595 SUNSET WAY	
CITY-ST-ZIP ST PETE BEACH FL 33706	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME Robert Borson Treasurer	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
STREET ADDRESS 6595 SUNSET WAY	
CITY-ST-ZIP ST PETE BEACH FL 33706	
TITLE NAME	Change <input type="checkbox"/> Addition <input type="checkbox"/>
STREET ADDRESS	
CITY-ST-ZIP	
TITLE NAME DIMITRIOS EXAMILOTIS	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
STREET ADDRESS 6595 SUNSET WAY	
CITY-ST-ZIP ST PETE BEACH FL 33706	
TITLE NAME	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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)(f), 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: JULIUS WOLF 3-21-2000 787 360 4706
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (9/99)