**FILED** 

## 2003 NOT-FOR-PROFIT CORPORATION

## UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # 759183

UI	NIFORM BUSINE	SS REPORT	(UBR)		Jul	07, 200	38:00	am
DOCUMENT # 759183  1. Entity Name					Se	ecretary 7-07-2003 90306	of Sta	ıte
MARKER	"5" CONDOMINIUM ASSOCIA	TION, INC.						
18201 GULF BLVD		Mailing Address ** RESOURCE 100 SW CLEVELAND AVE 7300 Park St. LARGO FL 53778 Servinole, FL 33777 US		k St. 33777		IA 18381 HIBER 1848 ANN BUR	<u> </u>	
	Place of Business	3. Mailing Address 7300 Park S	7300 Park St.					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES			
City & State		Seminale, A		4.	4. FEI Number <b>59-2105474</b> Applied For Not Applicable			
Zip	Country	<sup>Zip</sup> 33777	Country		Certificate of Sta	·	\$8.75 Add Fee Require	litional d
र-क्राप्त र रेर्	6. Name and Address of Current F	legistered Agent	Name	7,	Name and Addr	ess of New Register	ed Agent	<del></del>
REINHARDT, DEBRA RESOURCE PROPERTY MANAGEMENT 103 SW CLEVELAND AVE				Street Address (P.O. Box Number is Not Acceptable) 7300 Fack St.				
LARGO FL 33770			City					
8. The above the obligated SIGNATURE	named entity submits this statement for tions of registered agent.	the purpose of changing its re	egistered office o	Demni or registered a		ne State of Florida.		and accept
				\$5	in reinstating)  5.00 May Be ded to Fees		eck Payable	
10	OFFICERS AND DIR	FOTORS	144	ADC	ITIONS (CHANGE			
TITLE	VPD OFFICERS AND DIR	Delete	TITLE	10		S TO OFFICERS AND	Change	Addition
NAME STREET ADDRESS	TURNER, ROBERT 18201 GULF BLVD, #901	• • • • • • • • • • • • • • • • • • • •	NAME STREET ADDRESS	Heinz, M 18201 G	urshd.#303	3		
CITY-ST-ZIP	100		CITY-ST-ZIP	<b>VP</b>	Shires. R			
TITLE NAME STREET ADDRESS	FRANKLIN, LARRY 18201 GULF BLVD., #406	☐ Delete	TITLE I NAME STREET ADDRESS				<b>⊠</b> Change	Addition
CITY-ST-ZIP	REDINGTON SHORES FL		_ CITY-ST-ZIP	ļ.,		mag <u>jama a sa</u>	<u> </u>	
TITLE NAME STREET ADDRESS	D   Meana, Candido   18201 Gulf Blvd., #405	Delete	TITLE NAME STREET ADDRESS				☐ Change	☐ Addition
CITY-ST-ZIP	REDINGTON SHRS FL		CITY-ST-ZIP					
TITLE NAME STREET ADDRESS	PD MELENDEZ, AL 18201 GULF BLVD	☐ Delete	TITLE NAME STREET ADDRESS				☐ Change	Addition
CITY-ST-ZIP	REDINGTON SHORE FL 33708	<del></del>	CITY-ST-ZIP	<u> </u>				
NAME ,	WILLIAMS, PATRICK	☐ Delete	NAME  CIRCLE ADDRESS				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	18201 GULF BV 302   REDINGTON SH FL 33708		STREET ADDRESS CITY-ST-ZIP					
TITLE NAME		☐ Delete	TITLE NAME	SD Melenda	ez, Geri ut Bull. #Was		Change	Addition
STREET ADDRESS	I		STREET ADDRESS	1 18201 Gu	IT DIKE TYPE			1

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.

CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP

Redington Shores, A 33708