

2002 UNIFORM BUSINESS REPORT (UBR)

FILED

Jan 23, 2002 8:00 am
Secretary of State

01-23-2002 90013 039 ****61.25

DOCUMENT # 769297

1. Entity Name

REGENCY TOWERS CONDOMINIUM OWNERS' ASSOCIATION,
INC.

Principal Place of Business

Mailing Address

950 HWY. 98, E.
DESTIN FL 32541

950 HWY. 98, E.
DESTIN FL 32541

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

59-2371291

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

BOHRER, JAY
950 HWY 98 E 6032
DESTIN FL 32541

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete
NAME DUFF, ERNEST
STREET ADDRESS 1403 CHURCH ST.
CITY-ST-ZIP COLUMBIA MS 39429

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME SACKETT, JAMES
STREET ADDRESS 950 HWY 98 EAST, UNIT 7112
CITY-ST-ZIP DESTIN FL

TITLE ☒ Change ☐ Addition
NAME HINES, WARREN
STREET ADDRESS 950 HWY 98 E
CITY-ST-ZIP DESTIN, FL 32541

TITLE P ☐ Delete
NAME BOHEA, JAY
STREET ADDRESS 50 CHATEAU LATOUR
CITY-ST-ZIP KENNER LA

TITLE ☐ Change ☐ Addition
NAME BOHRER JAY W
STREET ADDRESS 50 CHATEAU LATOUR
CITY-ST-ZIP Kenner, LA

TITLE P ☐ Delete
NAME TAYLOR, JAMES
STREET ADDRESS 2000 MORRIS AVE, SUITE 2000
CITY-ST-ZIP BIRMINGHAM AL 35203

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ST ☐ Delete
NAME GRAMMER, ROBERT
STREET ADDRESS 950 HWY 98 E # 7052
CITY-ST-ZIP DESTIN FL 32541

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
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)(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]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/01)