

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 790996

1. Entity Name

SECOND OCEAN CLUB HOUSING ASSOCIATION, INC.

FILED
Jan 26, 2000 8:00 am
Secretary of State

01-26-2000 90035 027 ****61.25

Principal Place of Business

4410 NORTH A1A
VERO BEACH FL 32963

Mailing Address

4410 NORTH A1A
VERO BEACH FL 32963-5404

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

59-1318433

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

FORTE, LORRAINE H
C/O ADVANTAGE PROPERTY MANAGEMENT
1274 NE BUSINESS PARK PLACE
JENSEN BEACH FL 34957

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 ☐ Delete
NAME D
STREET ADDRESS LUDWIG, DEAN
CITY-ST-ZIP 4987 DINGMAN SCHOOL RD
EAST JORDAN MI 49727

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

TITLE ☐ Delete
NAME VD
STREET ADDRESS FIONDELLA, EDWARD
CITY-ST-ZIP 31 GLENDALE DRIVE
BRISTOL CT

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

TITLE ☐ Delete
NAME D
STREET ADDRESS MORRIS, ROBERT
CITY-ST-ZIP 1810 NW 23RD BLVD #128
GAINESVILLE FL

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

TITLE ☐ Delete
NAME PD
STREET ADDRESS MORSE, STEWART
CITY-ST-ZIP 906 RIDLEY CREEK DR.
MEDIA PA 19063

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

TITLE ☐ Delete
NAME DS
STREET ADDRESS STEDRONSKY, BARBARA
CITY-ST-ZIP 623 SELKIRK DR.
WINTERPARK FL 32792

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

TITLE ☐ Delete
NAME TD
STREET ADDRESS ROTH, JERRY
CITY-ST-ZIP P O BOX 424 N/A
RAYMOND ME

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 paper like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Director
Dean Ludwig - 1/18/2000 (901) 234-333

Date

Daytime Phone #