9/12/01-90029-003-$61.25-$61.25

2001 UNIFORM BUSINESS REPORT (UBR)

APPROVED AND FILED

01 SEP 27 AM 11:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A00085048

DO NOT WRITE IN THIS SPACE

DOCUMENT # N00000004564

1. Entity Name

SAN MARCO OF TAMPA TOWNHOMES ASSOCIATION, INC.

Principal Place of Business	Mailing Address
325 SOUTH BOULEVARD TAMPA FL 33606	325 SOUTH BOULEVARD TAMPA FL 33606

2. Principal Place of Business	3. Mailing Address
411 S. MELVILLE	411 S. MELVILLE
Suite, Apt. #, etc.: H.O.A.	Suite, Apt. #, etc.: HOA
City & State: TAMPA FL	City & State: TAMPA FL
Zip: 33606 Country: Hillsborough	Zip: 33606 Country: Hillsborough

4. FEI Number: 59-3739768 ☐ 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
MOLLOY, DANIEL L 325 SOUTH BOULEVARD TAMPA FL 33606	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 **After September 12, 2001, min. will be $236.25**	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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D LUM, JOHN 3705 SOUTH MACDILL AVENUE TAMPA FL 33611	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SEAN LANCE 411 S. MELVILLE #2 TAMPA, FL 33606	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAYWARD, W.A. 3705 SOUTH MACDILL AVENUE TAMPA FL 33611	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T SUSAN AUSTER 411 S. MELVILLE #4 TAMPA, FL 33606	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GULUZIAN, ARAM 3705 SOUTH MACDILL AVENUE TAMPA FL 33611	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOHN GIAMMARCO 411 S. MELVILLE, (HOA) TAMPA, FL 33606	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (5/01)

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: John Giammarco JOHN GIAMMARCO 9-7-01 (813) 258-0327

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #